FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNILIAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

	996	201707		CORPORATIONS			
OCUM Corporation N	lame	301787	(8)				
AMERIC/	an Equipmen	r of ft. Laude	RDALE INC.				
incipal Place of	f Business		iling Address			IDAN DIBNI DIDNI DIBNI 1	YIBII BIBH BIBH IBBA
2716 N DIXIE H WILTON MANO			2716 N DIXIE HWY WILTON MANORS FL	33334	Date Incorporated or Qualified	3a. Date of Las	st Report
					09/21/1990	04/24/	1995
Principa' Place	e of Business	2a. 26	Mailing Address		4. FEI Number 65-0228122		Applied For Not Applicable
Suite, Apt. #,	etc.		Suite, Apt. #. etc.		5. Cert/licate of Status Desired		.75 Additional ee Required
City & State		27	City & State		6. Election Campaign Financing	\$!	5.00 May Be
City & State		28			Trust Fund Contribution	A	dded to Fees
Zip I	Couni 25	try 29	Zip	Country 30		™ o	
		ress of Current Regis	tered Agent		10. Name and Address of New F	legistered Ageni	
1 000000	SALBA WALTED			81 Name	(2.C. F). Number of Not Acceptab	201	
	Baum, Walter V. 53RD CT.			82 Street Add	ress (P.O. Box Number is Not Acceptat	ле <i>ј</i> 	
	HLL FL 33351			83			
				84 City		FL 85	Zip Code
IONATURE		Compression Section Con-	aggir ares (S	DTs: Buggaard Agents Faint follon	ration submits this statement for the pured of directors. I hereby accept the application of the pured of directors and the pured of th	DATE ICERS AND DIRE	CTORS IN 12
ITLE	P		DELETE	1 1 TITLE		Cha	ange 🔲 Addition
IAME	LORBERBAUM, 8621 NW 53RD			1.2 NAME 1.3 STREET ADDRESS			
TREET ADDRESS	LAUDERHILL FL			1.4 CITY-ST-ZIP	MI TO MARKET TO THE TOTAL TO TH		
ITLE			DELETE	2 1 TITLE		☐ Cha	ange 🔲 Addition
IAME TREET ADDRESS				2.2 NAME 2.3 STREET ADDRESS			
CITY - SI - ZIP				2.4 CHTY+\$1-7IP		F71 0h	anno 🗖 Addition
ITLE			☐ DELETE	3 1 TILLF 3 2 NAME		□ Ch.	ange 🔲 Addition
JAME STREET ADDRESS				3.2 NAME 3.3 STREET ADDRESS			
CITY-ST-ZIP				3 4 C(TY - ST - Z(P		☐ Ch	ange 🗍 Addition
ITLE			☐ DELĒTE	. 4 1 TITLE . 4 2 NAME		□ 0	ange Li Austron
NAME STREET ADDRESS				4.3 STREET ADDRESS			
OHY-ST-ZIP				4.4 CITY - ST - ZIF			anne [] Addition
TITLE			DELETE	5 1 TiTLE		☐ Cn	iange
NAME				5.2 NAME 5.3 STREET ADDRESS			
STREET ADDRESS DITY-S1-ZIP				5 4 CITY - ST - ZIF			
TITLE			☐ DELE1E	6 1 TITLE		Cr	nange 🗌 Addition
NAME				6.2 NAME			
STREET ADDRESS				63 STREET ADDRESS 64 CITY+S1-ZIP			
CITY - ST - ZIP	Legistry that the infor	mation supplied with th	is filing is voluntarily fu		for the exemption stated in Section 11 rate and that my signature shall have the	9.07(3)(k). Florida	Statutes, I further
		atad an this accurat roo.	ad ar europlemental ar	nnual renort is true and accu	rate and that my signature shall have it	ic same ioder and	
14. I do hereby certify that	t the information indic Lam an officer or dire	ated on this arridarreposition actor of the corporation 3 if changed, or on an a	or the receiver or trus	тве впроменей то вхесите т	nis report as required by Chapter 607,	Florida Statutes; a	ind that my name