	NOW: FILING FE	E AFTER M	AY 1ST	IS \$5	50.00	-	ILEI	_	~ ~
		F				May 12	1998	8 8:0	00ar
ANNUAL REPORT		Secretary		ary of Stat		Secretary of State			
		DIVISION OF CORPORATIONS				шус	лы	ac	
 Corporation 	MENT # SO58 FFICES OF DEBORAH A		(9) ^{A.}			I ARAMANA AN ANNAL TANA ARAA AANA		u a di ang	I DIŬII (BAI
rincinal Plac	e of Business	Mailing A	ddress					ian cha lin	
Trincipal Place of Business Mailing Address 165 EAST PALMETTO PARK ROAD 165 EAST PALMETTO F BOCA RATON FL 33432 BOCA RATON FL 33432						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified			
Principal P	lace of Business	2e. Mailin	a Address			4. FEI Number			plied For
1	· · · · · · · · · · · · · · · · · · ·	26				65-0226929		No	t Applicable
Suite, Apt.	#, etc.	Suite, 27	Apt. #, etc.			5. Certificate of Status Desired		\$8.75 / Fee Re	
City & State		City & 28	State		·	6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	
Zip	26	Zip 29		30 Cou	intry	 This corporation owes or has Personal Property Tax due Jul 		- ' -	angible] No
	9, Name and Address of Cu RMAN, DEBORAH A. ESQ	irrent Registered #	lgent	1721-	81 Name	10. Name and Address of New I		Igent	
	5 EAST PALMETTO PARK RC				82 Street Add	iress (P.O. Box Number is Not Accept	,		
BO	CA RATON FL 33432		8, Florida Stati	utes, the al	83 84 City		FL	85 Zip (
BO 1. Pursuant I office or n agent. I a IGNATURE	CA RATON FL 33432 to the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the o	0502 and 607. 1500 State of Florida. Suc philigations of, Soctio			83 64 City powe-named cor d by the corpora utes.	poration submits this statement for the ation's board of directors. I hereby acc	FL purpose of ept the appo	11	
BO 1. Pursuant office or r agent. I a IGNATURE	CA RATON FL 33432 to the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the o	0502 and 607. 1500 State of Florida. Suc philigations of, Soctio			83 64 City powe-named cor d by the corpora utes.		FL purpose of cept the appo	changing It bintment as	s registered registered S IN 12
BO 1. Pursuant i office or n agent. I a IGNATURE 2. TLE	CA RATON FL 33432 to the provisions of Sections 607 egistered agent, or both, in the 5 m familiar with, and accept the o Bignature, typed or printed name of registere OFFICE RS D	0502 and 607, 150 State of Florida. Suc biligations of, Soction Independent and Isle If applica		DTE: Regislere 13. 1.1 Tř	83 84 City cove-named cord d by the corpora- utes. 3 Agent egnature requirements TLE	rporation submits this statement for the ation's board of directors. I hereby acc	FL purpose of ept the apport DATE FICERS AND	changing It bintment as	s registered registered S IN 12
BO 1. Pursuant office or n agent. I a GNATURE 2. ILE ME	CA RATON FL 33432 to the provisions of Sections 607 egistered agent, or both, in the 5 m familiar with, and accept the o Signature, typed or printed name of registere OFFICE RS D CARMAN, DEBORAH A.	0502 and 607. 150 State of Fioricia. Suc biligations of, Soction a agent and Mile If applica AND DIRECTORS	ble (NC	DTE: Registered 13. 1.1 Tř 1.2 N/	83 84 City bove-named cord d by the corpora- utes. 3 Agent egnature requires TLE WE	rporation submits this statement for the ation's board of directors. I hereby acc	FL purpose of ept the apport DATE FICERS AND	changing it pintment as DIRECTOR	s registered registered S IN 12
BO 1. Pursuant i office or n agent. I a IGNATURE 2. TLE WE REET ADORESS	CA RATON FL 33432 to the provisions of Sections 607 egistered agent, or both, in the 5 m familiar with, and accept the o Bignature, typed or printed name of registere OFFICE RS D	0502 and 607. 150 State of Fioricia. Suc biligations of, Soction a agent and Mile If applica AND DIRECTORS	ble (NC	01E: Registered 13. 1.1 Tř 1.2 N/ 1.3 ST	83 84 City cove-named cord d by the corpora- utes. 3 Agent egnature requirements TLE	rporation submits this statement for the ation's board of directors. I hereby acc	FL purpose of ept the apport DATE FICERS AND	changing it pintment as DIRECTOR	s registered registered
BO 1. Pursuant i office or r agent. I a IGNATURE 2. TLE WE REET ADORESS TY - ST-ZP TLE	CA RATON FL 33432 to the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the o Bignature typed or printed name of registere OFFICE RS D CARMAN, DEBORAH A. 165 E. PALMETTO PK RD	0502 and 607. 150 State of Fioricia. Suc biligations of, Soction a agent and Mile If applica AND DIRECTORS	ble (NC	DTE: Registerer 13. 1.1 Tr 1.2 N/ 1.3 ST 1.4 Cl 2.1 Tl	83 64 City bove-named cord d by the corpora- utes. 3 Agent egnature requires. TLE WE REET ADORESS TY-ST-ZIP TLE	rporation submits this statement for the ation's board of directors. I hereby acc	FL purpose of nept the apport Date FICERS AND	changing it pintment as DIRECTOR	s registered registered S IN 12
BO	CA RATON FL 33432 to the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the o Bignature typed or printed name of registere OFFICE RS D CARMAN, DEBORAH A. 165 E. PALMETTO PK RD	0502 and 607. 150 State of Fioricia. Suc biligations of, Soction a agent and Mile If applica AND DIRECTORS	Die (NC	DTE: Registerer 13. 1.1 Tr 1.2 N/ 1.3 ST 1.4 Cl 2.1 Tr 2.2 N/	83 64 City bove-named cord d by the corpora- utes. 3 Agent egnature requires. TLE WE REET ADORESS TY-ST-ZIP FLE WE WE	rporation submits this statement for the ation's board of directors. I hereby acc	FL purpose of nept the apport Date FICERS AND	changing It pintment as DIRECTOR	s registered registered S IN 12
BO 1. Pursuant office or n agent. I a IGNATURE 2. ILE ME REET ADORESS IV- ST-ZIP ILE ME REET ADORESS	CA RATON FL 33432 to the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the o Bignature typed or printed name of registere OFFICE RS D CARMAN, DEBORAH A. 165 E. PALMETTO PK RD	0502 and 607. 150 State of Fioricia. Suc biligations of, Soction a agent and Mile If applica AND DIRECTORS	Die (NC	DTE: Registerer 13. 1.1 Tr 1.2 N/ 1.3 ST 1.4 Cl 2.1 Tr 2.2 N/ 2.3 ST	83 64 City bove-named cord d by the corpora- utes. 3 Agent egnature requires. TLE WE REET ADORESS TY-ST-ZIP TLE	rporation submits this statement for the ation's board of directors. I hereby acc	FL purpose of nept the apport Date FICERS AND	changing It pintment as DIRECTOR	s registered registered S IN 12
BO	CA RATON FL 33432 to the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the o Bignature typed or printed name of registere OFFICE RS D CARMAN, DEBORAH A. 165 E. PALMETTO PK RD	0502 and 607. 150 State of Fioricia. Suc biligations of, Soction a agent and Mile If applica AND DIRECTORS	Die (NC	DTE: Registerer 13. 1.1 Tř 1.2 N/ 1.3 ST 1.4 Cl 2.1 Tř 2.2 N/ 2.3 ST 2.4 C 3.1 Tř	83 64 City bove-named cond d by the corpora- utes. 3 Agent egnature requires. 14 Agent egnature requires. 15 Agent egnature requires. 16 Agent egnature requires. 17 Agent egnature requires. 17 Agent egnature requires. 18 Agent egnature requires. 18 Agent egnature requires. 19 Agent egnature r	rporation submits this statement for the ation's board of directors. I hereby acc	FL purpose of nept the apport Date FICERS AND	changing It pintment as DIRECTOR	s registered registered S IN 12
BO	CA RATON FL 33432 to the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the o Bignature typed or printed name of registere OFFICE RS D CARMAN, DEBORAH A. 165 E. PALMETTO PK RD	0502 and 607. 150 State of Fioricia. Suc biligations of, Soction a agent and Mile If applica AND DIRECTORS	Die (NC	DTE: Registerer 13. 1.1 Tř 1.2 N/ 1.3 ST 1.4 Cl 2.1 Tř 2.2 N/ 2.3 ST 2.4 C 3.1 Tř 3.2 N/	83 64 City bove-named cord d by the corpora- utes. 3 Agent egnature requires. TLE WE REET ADORESS TY-ST-ZIP TLE WE REET ADORESS ITY-ST-ZIP TLE WE WE	rporation submits this statement for the ation's board of directors. I hereby acc	FL purpose of nept the apport Date FICERS AND	changing it pintment as DIRECTOR Change	S IN 12
BO	CA RATON FL 33432 to the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the o Bignature typed or printed name of registere OFFICE RS D CARMAN, DEBORAH A. 165 E. PALMETTO PK RD	0502 and 607. 150 State of Fioricia. Suc biligations of, Soction a agent and Mile If applica AND DIRECTORS	Die (NC	DTE: Registerer 13. 1.1 Tr 1.2 N/ 1.3 ST 1.4 Ci 2.1 Tr 2.3 ST 2.4 C 3.1 Tr 3.2 N/ 3.3 ST 3.3 ST	83 64 City bove-named cond d by the corpora- utes. 3 Agent egnature requires. 14 Agent egnature requires. 15 Agent egnature requires. 16 Agent egnature requires. 17 Agent egnature requires. 17 Agent egnature requires. 18 Agent egnature requires. 18 Agent egnature requires. 19 Agent egnature r	rporation submits this statement for the ation's board of directors. I hereby acc	FL purpose of nept the apport Date FICERS AND	changing it pintment as DIRECTOR Change	S IN 12
BO	CA RATON FL 33432 to the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the o Bignature typed or printed name of registere OFFICE RS D CARMAN, DEBORAH A. 165 E. PALMETTO PK RD	0502 and 607. 150 State of Fioricia. Suc biligations of, Soction a agent and Mile If applica AND DIRECTORS	Die (NC	DTF: Registerer 13. 1.1 Tr 1.2 N/ 1.3 ST 1.4 CI 2.1 Tr 2.1 Tr 2.2 N/ 2.3 ST 2.4 C 3.1 Tr 3.2 N/ 3.3 ST 3.4 C 4.1 Tr 3.4 C	B3 B4 City Dove-named cond doy the corporative tres. Appent equalitie requ TLE WE REET ADDRESS TY-ST-ZIP TLE WE REET ADDRESS ITY-ST-ZIP TLE WE REET ADDRESS ITY-ST-ZIP TLE WE REET ADDRESS ITY-ST-ZIP TLE WE	rporation submits this statement for the ation's board of directors. I hereby acc	FL pourpose of pept the apport DATE FICERS AND	changing it pintment as DIRECTOR Change	S IN 12 S IN 12 Addition
BO	CA RATON FL 33432 to the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the o Bignature typed or printed name of registere OFFICE RS D CARMAN, DEBORAH A. 165 E. PALMETTO PK RD	0502 and 607. 150 State of Fioricia. Suc biligations of, Soction a agent and Mile If applica AND DIRECTORS	Die (NC	DTF: Registerer 13. 1.1 Tř 1.2 N/ 1.3 ST 1.4 CI 2.1 Tř 2.3 ST 2.4 C 3.1 Tř 3.2 N/ 3.3 ST 3.4 C 4.1 Tř 4.2 N	83 64 City bove-named cond d by the corpora- utes. 3 Apent egnature requires. 3 Apent egnature requires. 14 City 14 City	rporation submits this statement for the ation's board of directors. I hereby acc	FL pourpose of pept the apport DATE FICERS AND	changing it changing it DIRECTOR Change	S IN 12 S IN 12 Addition
BO	CA RATON FL 33432 to the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the o Bignature typed or printed name of registere OFFICE RS D CARMAN, DEBORAH A. 165 E. PALMETTO PK RD	0502 and 607. 150 State of Fioricia. Suc biligations of, Soction a agent and Mile If applica AND DIRECTORS	Die (NC	DTF: Registerer 13. 1.1 Tr 1.2 N/ 1.3 ST 1.4 Ci 2.1 Tr 2.3 ST 2.4 C 3.1 Tr 3.2 N/ 3.3 ST 3.4 C 4.1 Tr 4.2 N 4.3 ST 3.4 ST	B3 B4 City Dove-named cond doy the corporative tres. Appent equalitie requ TLE WE REET ADDRESS TY-ST-ZIP TLE WE REET ADDRESS ITY-ST-ZIP TLE WE REET ADDRESS ITY-ST-ZIP TLE WE REET ADDRESS ITY-ST-ZIP TLE WE	rporation submits this statement for the ation's board of directors. I hereby acc	FL pourpose of pept the apport DATE FICERS AND	changing it changing it DIRECTOR Change	S IN 12 S IN 12 Addition
BO	CA RATON FL 33432 to the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the o Bignature typed or printed name of registere OFFICE RS D CARMAN, DEBORAH A. 165 E. PALMETTO PK RD	0502 and 607. 150 State of Fioricia. Suc biligations of, Soction a agent and Mile If applica AND DIRECTORS	Die (NC	DTF: Registerer 13. 1.1 Tř 1.2 N// 1.3 ST 1.4 CI 2.1 Tř 2.3 ST 2.4 C 3.1 Tř 3.2 N/ 3.3 ST 3.4 C 4.1 Tř 4.2 N 4.3 ST 3.4 C 4.1 Tř 5.1 Tř	B3 B4 City Dove-named cond d by the corporative tress Appent egnature requ TLE We REET ADDRESS TY-ST-ZIP TLE WE REET ADDRESS ITY-ST-ZIP TLE WE REET ADDRESS ITY-ST-ZIP TLE WE REET ADDRESS TTY-ST-ZIP TLE AME REET ADDRESS TTY-ST-ZIP TLE AME REET ADDRESS TY-ST-ZIP TLE	rporation submits this statement for the ation's board of directors. I hereby acc	FL pourpose of pept the apport DATE FICERS AND	changing it changing it DIRECTOR Change	S IN 12 S IN 12 Addition
BO	CA RATON FL 33432 to the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the o Bignature typed or printed name of registere OFFICE RS D CARMAN, DEBORAH A. 165 E. PALMETTO PK RD	0502 and 607. 150 State of Fioricia. Suc biligations of, Soction a agent and Mile If applica AND DIRECTORS	DELETE	DTF: Registerer 13. 1.1 Tr 1.2 N/ 1.3 ST 1.4 Ci 2.1 Tr 2.3 ST 2.4 C 3.1 Tr 3.2 N/ 3.3 ST 3.4 C 4.1 Tr 4.2 N 4.3 ST 3.4 C 5.1 Tr 5.1 Tr 5.2 N/ 5.1 Tr	B3 B4 City Dove-named con d by the corpora utes. J Apont egnature requ TLE WE REET ADDRESS TY-ST-ZIP TLE WE ME REET ADDRESS TY-ST-ZIP TLE WE	rporation submits this statement for the ation's board of directors. I hereby acc	FL pourpose of pept the apport DATE FICERS AND	changing it changing it DIRECTOR Change Change	S IN 12 S IN 12 Addition
BO	CA RATON FL 33432 to the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the o Bignature typed or printed name of registere OFFICE RS D CARMAN, DEBORAH A. 165 E. PALMETTO PK RD	0502 and 607. 150 State of Fioricia. Suc biligations of, Soction a agent and Mile If applica AND DIRECTORS	DELETE	DTF: Registerer 13. 1.1 Tr 1.2 N/ 1.3 ST 1.4 Ci 2.1 Tr 2.3 ST 2.4 C 3.1 Tr 3.2 N/ 3.3 ST 3.4 C 4.1 Tr 4.2 N 3.3 ST 3.4 C 4.1 Tr 4.2 N 4.3 ST 4.4 Cr 5.1 Tr 5.2 N/ 5.3 ST 5.3 ST	B3 B4 City Dove-named con d by the corpora utes. J Agent egnature requ TLE WE REET ADORESS TY-ST-ZIP TLE WE TLE WE TLE WE TLE WE TLE WE TLE TL	rporation submits this statement for the ation's board of directors. I hereby acc	FL pourpose of pept the apport DATE FICERS AND	changing it changing it DIRECTOR Change Change	S IN 12 S IN 12 Addition
BO	CA RATON FL 33432 to the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the o Bignature typed or printed name of registere OFFICE RS D CARMAN, DEBORAH A. 165 E. PALMETTO PK RD	0502 and 607. 150 State of Fioricia. Suc biligations of, Soction a agent and Mile If applica AND DIRECTORS	DELETE	DTF: Registerer 13. 1.1 Tr 1.2 N/ 1.3 ST 1.4 Ci 2.1 Tr 2.3 ST 2.4 C 3.1 Tr 3.2 N/ 3.3 ST 3.4 C 4.1 Tr 4.2 N 3.3 ST 3.4 C 4.1 Tr 4.2 N 4.3 ST 4.4 Cr 5.1 Tr 5.2 N/ 5.3 ST 5.3 ST	B3 B4 City Dove-named cond d by the corporative requires. Appent egnature requires. Appent egnature requires. TLE WE REET ADDRESS TY-ST-ZIP TLE WE REET ADDRESS ITY-ST-ZIP TLE WE REET ADDRESS TY-ST-ZIP TLE ME IREET ADDRESS TY-ST-ZIP TLE ME IREET ADDRESS TY-ST-ZIP	rporation submits this statement for the ation's board of directors. I hereby acc	FL pourpose of pept the apport DATE FICERS AND	changing it changing it DIRECTOR Change Change	s registered registered S IN 12 Addition
BO	CA RATON FL 33432 to the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the o Bignature typed or printed name of registere OFFICE RS D CARMAN, DEBORAH A. 165 E. PALMETTO PK RD	0502 and 607. 150 State of Fioricia. Suc biligations of, Soction a agent and Mile If applica AND DIRECTORS	DELETE	DTF: Registerer 13. 1.1 Tr 1.2 N// 1.3 ST 1.4 Ci 2.1 Tr 2.3 ST 2.4 C 3.1 Tr 3.2 N/ 3.3 ST 3.4 C 4.1 Tr 4.2 N 3.3 ST 3.4 C 4.1 Tr 5.1 Tr 5.2 N/ 5.3 ST 5.4 Ci 6.1 Tr 6.2 N/ 6.2 N/	B3 B4 City Dove-named con d by the corpora utes. J Apont egnature requ TLE WE REET ADDRESS TY-ST-ZIP TLE WE REET ADDRESS TY-ST-ZIP TLE WE REET ADDRESS TY-ST-ZIP TLE ME IREET ADDRESS TY-ST-ZIP TLE ME	rporation submits this statement for the ation's board of directors. I hereby acc	FL pourpose of pept the apport DATE FICERS AND	changing it changing it DIRECTOR Change Change Change	S IN 12 S IN 12 Addition
BO	CA RATON FL 33432 to the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the o Bignature typed or printed name of registere OFFICE RS D CARMAN, DEBORAH A. 165 E. PALMETTO PK RD	0502 and 607. 150 State of Fioricia. Suc biligations of, Soction a agent and Mile If applica AND DIRECTORS	DELETE	DTF: Registerer 13. 1.1 Tr 1.2 N/ 1.3 ST 1.4 Ci 2.1 Tr 2.3 ST 2.4 C 3.1 Tr 3.2 N/ 3.3 ST 3.4 C 4.1 Tr 4.2 N 3.3 ST 3.4 C 4.1 Tr 5.3 ST 5.3 ST 5.4 Ci 5.4 Ci 6.1 Tr 6.3 ST 6.3 ST	B3 B4 City Dove-named cond d by the corporative d by the corporative sources. Appent egnature requ TLE We REET ADDRESS TY-ST-ZIP TLE WE REET ADDRESS ITY-ST-ZIP TLE WE REET ADDRESS TY-ST-ZIP TLE ME IREET ADDRESS TY-ST-ZIP TLE	rporation submits this statement for the ation's board of directors. I hereby acc	FL pourpose of pept the apport DATE FICERS AND	changing it changing it DIRECTOR Change Change Change	s registered registered S IN 12 Addition Addition