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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

1. Corporation	MENT # S078 NAME OF THE STATE O				1 (4 E LIA DE LA TELLE DE		14 115 11 11111	i i i i i i i i i i i i i i i i i
		Mailing Address						
6680 LANTAN STE 1	A RD	6680 LANTANA RD STE 1						
LAKE WORTH	FL 33467	LAKE WORTH FL 3348	67	3. Date Incorporated or Qualified 38. Date of Last Report			eport	
US		US			10/23/1990	0	4/25/199	95
2. Principal Pla	ce of Business	2a. Mailing Address			4. FEI Number		[]	Applied For
21		26			65-0224181			Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.	一		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State	City & State		6. Election Campaign Financing			0 May Be
3		28			Trust Fund Contribution			d to Fees
Zip Country		Zip Cc		itry	8. This corporation has liability for intangible tax under s. 199.03		199.032,	
4	25	29	30		Florida Stalules			
	9. Name and Address of Cu	rent Registered Agent		B1 Name	TO. Name and Address of New	negistered	Agent	
OATTEO	NO MAYED		[70 C C N 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	List-		
	no, mayer Versity Drive			82 Street Addr	ress (P.O. Box Number is Not Accepta	iDi6)		
STE 802				83				
CORAL SPRINGS FL 33065			-	84 City			85 Zu	p Code
				ŕ	ation submits this statement for the p	FI	<u> </u>	
SIGNATURE _		AND DIRECTORS	13.	Agent signature respons	d which remoting ADDITIONS/CHANGES TO OF	FICERS AN		
TITLE	P	☐ DELETE	1.110				☐ Change	☐ Addition
NAME	LEE, BERT 7431 CANAL DR		12 NA	REET ADORESS				
STREET ADDRESS	LAKE WORTH FL			TY-SI-ZIP				
CITY-ST-ZIP TITLE	S			ILF			☐ Change	Add-tion
NAMÉ	LEE, CHERI		2 2 NA	KME .				
STREET ADDRESS	7431 CANAL DR		2 3 S1	REET ADDRESS				
CITY-ST-ZIP	LAKE WORTH FL			1Y-S*-7IP			☐ Change	☐ Addition
TITLE	S LEE CHEDI	☐ DELETE	3 1 1 i				ш спануе	[] Montion
NAME CENTER ADDRESS	LEE, CHERI 7431 CANAL DR		32 N/	TREET ADDRESS				
STREET ADDRESS CITY-ST-ZIP	LAKE WORTH FL			TY-S1-ZIF				
TITLE	Date Wolling	☐ DELETE	4. 1 Ti				Change	Add tion
NAME			4.2 N	AMÉ				
STREET ADDRESS			4351	IREET ADDRESS				
CITY-S1-ZIP		P New Fire		TY - S1 - 716'			Change	C) Addition
TITLE		DEFELE	5 1 T				☐ Change	☐ Addition
NAME STREET ADDRESS			5 2 N	FREET ADDRESS				
STREET ADDRESS				ITY-S1-ZIP				
CITY-ST-ZIP TITLÉ		☐ DELETE	6 1 7				Change	Addition
NAME			62 N	AME				
STREET ADDRESS			635	TREET ADDRESS				
CITY-ST-ZIF			64C	11Y - ST - 7IP				
certify that	t the information indicated on this. Lam an officer or director of the c		nnuai reporti tee emicowe		for the exemption stated in Section 1 ate and that my signature shall have this report as required by Chapter 607,			

SIGNATURE:

3/18/96 407-641.3255...