## 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

DOCUMENT # 1. Corporation Name

(2)

Frincipal Place of Busness Mailing Address  9733 ERICA COURT BOCA RATON FL 33496  8004 RATON FL 33496								
BOCA HATO	IN FL 33496	BOCA RA	ITON FL 33496	•		3. Date incorporated or Qualified	3a. Date of Last	
2. Principal Pl	ace of Business	2a. Mailing a	Address			10/10/1990 4. FEI Number	02/20/1	
[21]		26				65-0235981	-	Applied For
Suite, Apt. #, etc. Suite, Apt. #, etc.			pt. #, etc.				Not Applicable \$8.75 Additional	
22 27						5. Certificate of Status Desired		e Required
City & State City & State 28						6. Election Campaign Financing	\$5.	.00 May Be
[23] Zgi		28		, <u>.</u>		Trust Fund Contribution	Adv	ded to Fees
24	Country 25	[ Ζιρ [aa]		Countr	у	B. This corporation has liability for i		s 199.032,
	9. Name and Address of Curr	29 ent Registered Ap	ent	30		Florida Statutes Yes		
		3		81	Name	10. Name and Address of New R	egistered Agent	
HALL, D	EBORAH E.			ļ				
9733 ERICA COURT			82	Street Ad	ress (P.O. Box Number is Not Acceptable)			
BOCA F	ATON FL 33496			83				
					ļ			
·				84	,			Zip Code
11. Parsuant t	to the provisions of Sections 607.050	02 and 607,1508, F	lorida Statutes	the above-	named corp	coration submits this statement for the purporard of directors. I hereby accept the appo	oose of changing its	s registered office
familiar wit	th, and accept the obligations of Se	ction 607.0505, Flo	was autnonzec rida Statutes.	by the corp	xoration's bo	pard of directors. I hereby accept the appoint	intment as register	ad agent. I am
SIGNATURE								
12.	Signal on type for product healer of regularization		(NOT).		nt signature requ	red when reinstating)	DATE	
- 15: Tille	PST OFFICERS A	ND DIRECTORS	DELF TŁ	13.		ADDITIONS/CHANGES TO OFFI	· · · · · · · · · · · · · · · · · · ·	
NAME	HALL, DEBORAH E.	U	DELFIE	1. 1 TITLE			☐ Change	Addition
SUBERT ADDRESS	9733 ERICA COURT			1.2 NAME				
CITY ST-ZIP	BOCA RATON FL			13 STREE				
TIF. E	D		DELETE	2 1 THILE	SI-ZIF		F-1.0:	
NAME	HALL, DEBORAH E.			2 2 NAME			Change	Addition
STREET ADDRESS	9733 ERICA COURT			23 STREET	ADDRESS			ŀ
CHY-ST ZP	BOCA RATON FL			2 4 CITY - S				
TITLE			DELETE	3 1 TITLE	, , , , , , , , , , , , , , , , , , ,		Change	Addition
NAME				3.2 NAME			E Change	
SPEEL ADDRESS				33 STREE	I ADDRESS			1
CITY ST-ZIP	and the second s			3.4 C(TY - S	I - ZIP			Į
Hilf			DELETE	4.1 TITLE			☐ Change	Addition
NAM(				4.2 NAME			_ ,	_ '
STREET ADDRESS				4.3 STREET	ADDRESS			
CHTY-ST ZIP		· <u>-</u>		4.4 CITY - S	Y - ZIP			
THILE			DELETE	5 1 TITLE			Change	☐ Addition
NAME STAGET ADDRESS				52 NAME				i
STREET ADDRESS				5 3 STREET				ĺ
_CITY+S*-7I/: TITLE			DELETE	5 4 CHY-S	1-ZIP			
NAME		Ш	DETE IE	6 1 TITLE			Change	Addition
STREET ADDRESS				6.2 NAME				ŀ
CITY-SI-ZIP				6 3 STREET				
	codity that the information repolled	units their floor in and		64 City-S	I - ZIP			

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on his annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

AUGSTAN E. HALL
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date