FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00						
PROFIT CORPORATION  FLORIDA DEPARTMENT OF STATE						
1	JAL REPORT		Sandra Bil Secretary			
	1996		DIVISION OF CO			
DOCU	MENT # S (.	3984				
1. Corporation Name REGELIC & MANAGEMENT ADD DEVELOPMENT, INC.					••	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ę		,		
Principal Place	of Business	Mailing Ad	droce			
3808	N.E. 2094	terrace.	3,035			
Misso	ni, fl. 33186					
					3. Date Incorporated or Qualified	3a. Date of Last Report
2. Principal Pla	ace of Business N.E. JU9' Kurk	2a. Mailing	Address		4. FEI Number	Applied For
Suite, Apt. i			Apt. #, etc.		<b>6.5022 78 16 5.</b> Certificate of Status Desired	Not Applicable \$8.75 Additional
City & State	2	27   City & S	State		Gertificate of Status Desired     Election Campaign Financing	Fee Required
23 Milla	11, FC	28			Trust Fund Contribution	\$5.00 May Be Added to Fees
24 3318	Country U 1	Zip <b>29</b>	30	Country	(8.) This corporation has liability for Florida Statutes ☐ Yes	
	9. Name and Address of C			81 Name	10. Name and Address of New F	legistered Agent メ3
( 5	REFERS A. 3808 N.E.	GRENE		82 Street	Address (P.O. Box Number is Not Acceptate	704 488.6800 ×3
,				83		
	PN to TURA	Fr. 33/	86	84 City		85 Zip Code
11. Pursuant to	o the provisions of Sections 607	7.0502 and 607.1508, I	Florida Statutes, tl	no about popular	orporation submits this statement for the pur	FL
0. 109/010/0	ed agent, or both, in the State o h, and accept the obligations of	т попоа, висп спанце	was aumorized bi	y the corporation's	orporation subtricts this statement for the pull board of directors. I hereby accept the app	ointment as registered agent. I am
	Signature, typed or printed name of registere		(NOTE: Re	gistered Agent signature r	equired when reinstannyl	DATE
12.	PRETIDENT . CO	S AND DIRECTORS	DELETE	13. 1.1 TO LE <b>V</b>	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12  Change Addition
NAME	JEFFREY A GRE 3808NE 2094	DIE HIRP		1.2 NAME	THUA BURNS REIMAN TORR	Change 12 Addition 21
STREET ADDRESS CITY-ST-ZIP	MIAMI, FL.	33180		1.3 STREET ADDRESS 1.4 City-St-Zip	MIAMI, FL. 33180	ZEO
TITLE NAME	BRADLEY J. VID.	u X	DELETE	2 1 TITLE		☐ Change ☐ Addition 👸
STREET ADDRESS	BRADLEY 1- VID.	es al.		22 NAME 23 STREET ADDRESS		
CITY - ST - ZIP TITLE	cellansa et.		) DELETE	2 4 CITY - ST - ZIP 3. 1 TITLE		Change College
NAME		_	Decem	3.2 NAME	<b>4000017</b> 9 04/25/96010	13-001 Addition
STREET ADDRESS CITY-ST-ZIP				3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	***200.00	13 001
THILE			) DELETE	4 1 TALE		Change Addition
NAME STREET ADDRESS				4.2 NAME 4.3 STREET ADDRESS	500000179	19725
CHY-SI-ZIP TITLE			DELETE	4.4 CITY-ST-ZIP	-04/25/96010 ***8.75	13002
NAME		L	DELETE	5 1 TITLE 5.2 NAME	***************************************	Change Addition
STREET ADDRESS				5 3 STREET ADDRESS		
CITY-ST-ZIP TITLE			DELETE	5.4 CITY+S1-ZIP 6. 1 TITLE	<u> </u>	☐ Change ☐ Addition
NAME STREET ADDRESS				6.2 NAME		_
CITY-ST-ZIP				6 3 STREET ADDRESS 6 4 City-St-Zip		
certify that t	certify that the information supp the information indicated on his am an officer or director of the	annum report or suppl	iementai annual re	non is true and ac	lify for the exemption stated in Section 119.6 curate and that my signature shall have the	come local effect on if made under
appears in Block 12 or Block 13 if changed by on ar attachment with an address.						
SIGNATURE: 4/5/96 305-937-5153 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR						
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