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 Name

DOCUMENT #

(7)

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ΔIK	MAAR	JAISER	MPNI.	INL

	of Rusiness	Mailing Address						
3711 N OCEAN BLVD. 3706 FT. LAUDERDALE FL 33308 FT. L		3706 N OCEAN BLVD #10 FT. LAUDERDALE FL 3330						
US		US			Date Incorporated or Qualified 01/25/1991	3a. Date of 04/1	t ast Rep 1/1995	
2. Principal Pla	on of Business	2a. Mailing Address			4. FEI Number	1 —3.34.7		pplied For
2. Principal Pia: 21	Se of Business	26 Suite, Apt. #, etc.			65-0237582			lot Applicable
Suite, Apt. #	, etc.				5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & State		City & State			6. Election Campaign Financing \$5.00 Ma			
23		28			Trust Fund Contribution			to Fees
Zip 24	Country 25	Zip	Country	,		□ No		199.032.
24	9. Name and Address of Currer				10. Name and Address of New F	legistered Ag	ent	
			81	Name				
LYNCH,	J DAVID		82	Street Addr	ess (P.O. Box Number is Not Acceptat	ile)		
3000 N F	FEDERAL HWY.			L				
	2, 2ND FLOOR		83					
FT. LAUDERDALE FL 33306		84	City		FL	85 Zip	Code	
SIGNATURE	h, and accept the obligations of Sections	t and title Lappicative (NO°E		nt squatore rection	diwhere receitable ge	DATE	IDE OT C	DO IN 10
12.	OFFICERS AN	D DIRECTORS	13.	т	ADDITIONS/CHANGES TO OFF		Change	Addition
TITLE	D	☐ DELETE	1. 1 TITLE	1		L	Changs	L. Addition
NAME	ROESEMANN, ARTHUR		1.2 NAME					
STREET ADDRESS	3706 N OCEAN BLVD #107			1 ADDRESS				
CITY-S1-ZIP	FT. LAUDERDALE FL	E) Dutte	14 CITY - ST - 7 P 2 1 TITLE			-	Change	Addition
TITLF	D	☐ DELÉTE	2 1 IIILE 2 2 NAME					_
NAME	LANYON, CHERIE			I ADDRESS				
STREET ADDRESS	3706 N OCEAN BLVD. #107		2.4 CHY					
CITY-ST-ZIP	FT. LAUDERDALE FL	DELETE	3 1 TeTLI				Change	Addition
TITLE			3.2 NAMI					
NAME				ET AUDRESS				
STREET ADDRESS			3.4 CITY					
CITY-ST-ZIP TITLE		DELETE	4. 1 101				Change	Addition
NAME			4 2 NAM					
STREET ADDRESS			4.3 STRE	EL ADDRESS				
CITY-ST-ZIP			4.4 C-TY	- ST - 7 (P				
TITLE		DELETE	5 5119				Change	Addition
MANAG			5.2 NAM	i				

14. If do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualfy for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this angual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer of director of the conforation of the receiver or truster enipowered to execute this report as required by Chapter CO7, Florida Statutes; and that my name appears in Block 12 or Block 3 if changed, of on an attachment with an address.

5.3 STREET ADDRESS

63 STREET ADDRESS

6.4 CRY - \$1 - 7/2

5.4 CITY - \$1 - ZIP

6 THILE

6.2 NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

FICER OR DIRECTOR

DELETE

Change

Addition