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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State

City & State 28	1	1996	A Esta William	DIVISION OF	CORPORA	TIONS				
Site of Size Six Markey Way STUART F1 Meric 200 Si Cope NovD STUART F2 Meric 3. Deter Incorporated or Coeffed 3a. Date of List Report CS/06/1981 3a. Date of CS/06/1981 3a. Date of List Report CS/06/1981 3a. Date of CS/06/1981 3a. Date of List Report CS/06/1981 3a. Date of C			S49961	(3)						
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STUART FL 34998 STUART	Principal Place o	of Business		Mailing Address				HOL BIOL BIRLL	HEN BIBIL	HIDII DHEHI FODE
3. Date Incorporated of Customic St. Date of Last Report OS/QO/1995 2. Principal Flux of Brances	STUART FL 34			SUITE A4-109) .					
2. Making Address Sec. Apr. III. Sec	US			2104H1 FE 34996				1		•
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Tust Fund Contribution	2			27					Fee F	Required
9. Name and Address of Current Registered Agent 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name and Address of New Registered Agent 12. Stroot Address P.O. Box Number is Not Address P.O. Box Number is Numb	City & State			· · · · · · · · · · · · · · · · · · ·						
9. Name and Address of Current Replatered Agent FILINOS, INC. 3732 RNV 16TH ST. FT. LAUDERDALE FL 33311 81		25	Country	t n		ntry			under s	199.032,
FILINGS, INC. 372 NW 16TH ST. FT. LAUDERDALE FL 33311 83 84	:4]		d Address of Current	L L					gent	
372 NW 16TH ST. FT. LAUDERDALE FL 33311 48	EU 11100	11.10				81 Name				
## Only ## Decided Company of Control in the State of Excital Such change was authorized by the corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Excital Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am SCRANIUM Population Populat						82 Street Add	dress (P.O. Box Number is Not Acceptab	le)		
11. Pursuant to this provisions of Skotions 607.0502 and 607.1502 and 607.1502 and 607.1502 and 607.1502 and 607.1502 and 607.1503. Foreias Statutes, the above-named corporation submits with provisions of body and copied to ediginative of Science 607.0503. Foreias Statutes, the above-named corporation is bear of directors. Thereby accept the appointment as registered agent. I am strength with a statute of the foreign submits and submits an			33311			83				
11. Furnishent to the provisions of Sections 607 (500) and					ļ	84 City			85 Z/c	Code
SISMATURE 2. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1911 PD HANZEL, SANDRA 17AAME 17	11. Pursuant to	the provisions	of Sections 607.0502 a	ing 607.1508, Florida Statu	tes, the abo		pration submits this statement for the pur	roose of chan	ging its re	egistered office
12. OF ICE PIS AND DIFFECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIFFECTORS IN 12 THE PD Change Addition HANZEL, SANDRA 12 AMA THANZEL, SANDRA 12 AMA THANZEL	or registere familiar with	a agent, or bot a, and accept the	n, in the State of Horica ie obligations of: Sectio	i Such change was authori n 607.0505, Florida Statute	zea by the c s.	orporation s bo	ard of directors. I hereby accept the appa	antment as re	gisterea	agent. I am
12. OFFICERS AND DIRECTORS 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 THE PD	SIGNATURE .	egradou, type fior pe	infect things of regulative diagon), as	othe Faqquisalor (N	OTal Registered	Agent signature regul	rea when renstating!	DATE	· -	
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SHELL ACORESS CLEV-ST-7P 14. I do hereby certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that I am an officer or director of the duporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.						i			onungo	
DELETE 6 1 TITLE Change Addition NAM! STREET ADDRESS CLY-SE-7P 14. I do hereby certify that the information supplied with this fining 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 this fining report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under call, that I am an efficer or director of the displacation of the fire feeder or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.	STREET ADDRESS				5381	REET ADDRESS				
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