Sulte, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired \$8.75 Additional Fee Required 22 27 City & State 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees 23 28 Country Zip Country B. This corporation owes or has paid the current year Intangible	FILE NOW: FILING PROFIT CORPORATION ANNUAL REPORT 1998		Sendre B Secretar		ARTMENT B. Morth itary of Stat	RTMENT OF STATE		FILED Jan 22 1998 8:00am Secretary of State	
Principal nack of business DALING Address DALING A			60528	(4)					
Principal Place of Busines Principal Place Prin	1221 BRICKELL AVENUE 1221 BRICKELL AVENUE 6TH FLOOR 6TH FLOOR							DO NOT WRITE IN THIS SPACE	·]
2. Principal Place of Business 24. Maling Acdicos 4. FEI Number Applied For Suite, Apit, et de. Suite, Apit, et de. Suite, Apit, et de. Suite, Apit, et de. Suite, Apit, et de. Suite, Apit, et de. Suite, Apit, et de. Suite, Apit, et de. City & State City & State Excetor Campaign Financing State for the provide of Business in the provide Business		-							
Sulfa, Apr. 4, efc. Sulfa, Apr. 4, efc. Sulfa, Apr. 4, efc. S. Cethiolane of Status Desired \$5.75 Adjational City & State City & State S. Cethiolane of Status Desired \$5.00 May Be Added is Pares Added is Pares 20 Country 21 Country S. Cethiolane of Status Desired \$5.00 May Be Added is Pares 21 20 Country 23 Country S. Cethiolane of Status Desired \$5.00 May Be Added is Pares 23 20 Country 23 Country S. Cethiolane of Status Desired \$5.00 May Be Added is Pares 24 25 Country 23 Country Name and Address of Country Vare Hampflein Paresan Property Tax due Jure 20 Vare 30 Var		lace of Business		ailing Address				4. FEI Number Applied For	
22		#, etc.	·····					SR 75 Additional	ie
20 20 <th< td=""><td>22</td><td></td><td></td><td></td><td></td><td></td><td></td><td>6 Leftilicate of Status Desired</td><td></td></th<>	22							6 Leftilicate of Status Desired	
Zp Country Zp Country Enhibit councel year handpile 28 28 30 Person Property in Xetue June 30 Wes 20 20 Wes	·	θ		ty & State					
B. Name and Address of Current Registered Agent ID. Name and Address of New Registered Agent MEYERSON, LAURENCE I221 BRCKELL AVE STHET ADDRS I221 BRCKELL AVE. IDELITE	Ζιρ		/ Zij	p		Country		B. This corporation owes or has paid the current year Intangible	1
MEYERSON, LAURENCE 1221 BRCKELL AVE BTH FLOOR MLAMI FL 33131 Image: Street Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florids Statutes, the above-rared corporation submits this statement for the purpose of changing its registered office or registered agont, ar buth, mit the State of Florids. Such changing was authorized by the corporation submits this statement for the purpose of changing its registered office or registered agont, ar buth, mit de State of Florids. Such changing was authorized by the corporation submits the statement for the purpose of changing its registered office or registered agont, are buth, mit de state of Florids. Such changing was authorized by the corporation's board of directors. I hereby accept the appointment is registered office or registered agont, are buth, mit de scape the obligations of. Second Row Jacob Purpose of changing its registered office. Thereby accept the obligations of Second Row Jacob Purpose of Additions. I hereby accept the appointment is registered office or registered agont. are buth, and accept the obligations of. Second Row Jacob Purpose of Addition F accept and the appoint and the registered office or registered agont. are buth, and accept the obligations of. Second Row Jacob Purpose of Addition F and the appoint and the appoint and the registered office or registered agont. are buth, and accept the obligations of. Second Row Jacob Purpose of Addition F and the appoint and the app	24			ed Agent	30		<u>.</u>		
Bit FLOOR MIAMI FL 33131 File 94 City File BS Zip Code 95 City File BS Zip Code 96 City File BS Zip Code 97 File Signet: A main with, and accept the object of Discost file File File 97 OFFICERS AND DIFECTORS 13 ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS IN 12 Except and advect of Discost file File 90 Table OFFICERS AND DIFECTORS 13 ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS IN 12 Except and advector of Discost file File 90 T221 BRICKELL AVE. 13 STRET ACCESS City of State File Addition 90 City of State MAMI FL Change Addition File Addition 90 City of State Stret Access City of State Code Addition File File </td <td>ME</td> <td></td> <td></td> <td>_</td> <td></td> <td>81</td> <td>Name</td> <td></td> <td></td>	ME			_		81	Name		
MIANI FL 33131 Ball 44 City Etc 45 City Etc 46 City Etc 47 Diversions of Sections 607 D002 and 607.1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. Tam Tamilar with, and a coopt the obligators of, Section 607.0005, Florids Statutes. SIGNATURE Biguitate period two obligators of, Section 607.0005, Florids Statutes. SIGNATURE Diversion of Section 607.0005, Florids Statutes. SIGNATURE Diversion of Section 607.0005, Florids Statutes. SIGNATURE OFFICERS AND DIFECTORS 12 OFFICERS AND DIFECTORS 13 ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS IN 12 14 PD 121 BRICKELL AVE. 1221 BRICKELL AVE. 1221 BRICKELL AVE. 121 BRICKELL AVE. 1221 BRICKELL AVE. 1221 BRICKELL AVE. 1221 BRICKELL AVE. 1221						82	Street Add	dress (P.O. Box Number is Not Acceptable)	\neg
Product PL BS Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above-nemed corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above-nemed corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above-nemed corporation submits this statement for the purpose of changing its registered agent, and eccept the objection 07.0005, Florida Statutes, the corporation's board of directors. I hereby accept the appointment as registered agent, and eccept the objection 07.0005, Florida Statutes, and addition of implant with any addition of agent and its agent and its agent and its of agent and its of agent and its of						83			-
II. Pursuant to the provisions of Socions 607 05:00 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Statutes, the above-named corporation's baard of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Statutes, the above-named corporation's baard of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Statutes, the above-named corporation's baard of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Statutes, the above-named corporation's baard of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Statutes, the above and the implementation of the purpose agent. I am mature and the implementation of the purpose agent. I am a data for the appointment as registered agent, or both, in the State of Florida. Statutes, in the State of Florida. Statutes, in the State of Florida. State of the appointment as registered agent, or both, in the State of Florida. State of the appointment as registered agent, or both, in the State of Florida. State of the appointment as registered agent, or both, in the State of Florida. State of the appointment as registered agent, or both, in the State of the appointment as registered agent, or both, in the State of Florida. State of the appointment as registered agent, or both, in the State of Florida. State of the appointment as registered agent, or both, in the State of Florida. State of the appointment as registered agent, or both, in the State of Florida. State of the appointment as registered agent, or both, in the State of Florida. State of the appointment as registered agent, or both, in the State of Florida. State of the appointment as registered agent, or both, in the State of Florida. State of the appointment agent agent agent agent agent agent agent						84	City	95 Zin Code	_
office of Registered agent, of oddi, in the State of Honda Such change was subhorized by the corporation's board of directors. Thereby accept the appointment as registered agent, of oddi, in the State of Honda Such change was subhorized by the corporation's board of directors. Thereby accept the appointment as registered agent, of oddi, in the State of Honda Such change was subhorized by the corporation's board of directors. Thereby accept the appointment as registered agent, of oddi, o							•		_
Bigsbare OPFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 HTLE PD ITILE 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Addition HTLE PD ITILE 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Addition STREET ADDRESS 1221 BRICKELL AVE. 13 STREET ADDRESS 1221 BRICKELL AVE. Addition ITILE DELETE 21 TILE 12 TILE Change Addition STREET ADDRESS 1221 BRICKELL AVE. 23 STREET ADDRESS CTIV-ST-2P Change Addition STREET ADDRESS 1221 BRICKELL AVE. 23 STREET ADDRESS CTIV-ST-2P Change Addition TITLE 0 DELETE 31 TILE Change Addition NAME PROMOFF, DAVID H. 24 CITV-ST-2P Cottor ST-2P Addition TITLE 0 DELETE 31 TILE Change Addition NAME 1221 BRICKELL AVE. 33 STREET ADDRESS CTIV-ST-2P Change Addition TITLE S	office or r agent. I a	egistered agent, or both m familiar with, and acce	, in the State of Florida. ppt the obligations of, Se	Such change was Such change was action 607.0505, F	utes, the at authorized Florida Stat	bove- d by t utes.	hamed cor he corpora	rporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered	1
MWE TANIS, ROY D 12 NME STRET ADDRESS 1221 BRICKELL AVE. 13 STRET ADDRESS ITRE D DELETE 21 TITF TITLE D DELETE 21 TITF NAME PROMOFF, DAVID H. 22 NAME STRET ADDRESS 1221 BRICKELL AVE. 23 STRET ADDRESS TTTLE D DELETE 21 TITF NAME PROMOFF, DAVID H. 22 NAME STRET ADDRESS 1221 BRICKELL AVE. 23 STRET ADDRESS TTTLE O DELETE 31 TITLE NAME HARRIS, LUCIOUS T 32 NAVE STRET ADDRESS 121 BRICKELL AVE. 33 STRET ADDRESS TTTLE S X21 BRICKELL AVE. STRET ADDRESS 122 NAVE STRET ADDRESS 121 BRICKELL AVE. STRET ADDRESS 121 BRICKELL AVE. STRET ADDRESS 122 BRICKELL AVE. STRET ADDRESS 122 BRICKELL AVE. STRET ADDRESS 122 BRICKELL AVE. STRET ADDRESS 121 BRICKELL AVE. NAME CARSTARPHEN, LISA R STRET ADDRESS 122 BRICKELL AVE. STRET ADDRESS 121 BRICKELL AVE. STRET ADDRESS 122 NME STRET ADDRESS 120 LETE	SIGNATURE	Signature, typed or printed name	ol tegistered agent and title if ap	plicable (NC	DTE: Registered	d Agent	signature raqu	uirod when reinstating) DATE	
NAME TANIS, ROY D 12 NME STREET ADDRESS 1221 BRICKELL AVE. 13 STREET ADDRESS IT/LE D DELETE 21 TITLF NAME PROMOFF, DAVID H. 22 NAME STREET ADDRESS 1221 BRICKELL AVE. 23 STREET ADDRESS TITLE D DELETE 21 TITLF NAME PROMOFF, DAVID H. 22 NAME STREET ADDRESS 1221 BRICKELL AVE. 23 STREET ADDRESS TITLE O DELETE 21 TITLE OTHE O DELETE 31 TITLE NAME HARRIS, LUCIOUS T 32 NAVE 33 STREET ADDRESS STREET ADDRESS 1121 BRICKELL AVE. 33 STREET ADDRESS 44 OTH ST-2/P TITLE S ZM DELETE 41 TITLE Addition NAME CARSTARPHEN, LISA R 4 2 NAME 4 3 STREET ADDRESS 42 NAME STREET ADDRESS 121 BRICKELL AVE 4 3 STREET ADDRESS 42 NAME STREET ADDRESS 121 BRICKELL AVE 4 3 STREET ADDRESS 42 NAME STREET ADDRESS 121 BRICKELL AVE 4 3 STREET ADDRESS 42 NAME STREE			FICERS AND DIRECTO						
street ADDRESS 1221 BRICKELL AVE: 13 STREET ADDRESS ctrv-str-zip MIAMI FL 14 ctrv-str-zip TITLE D DELETE 21 TITLF D DELETE 21 TITLF Change Addition Street ADDRESS 1221 BRICKELL AVE. 23 STREET ADDRESS Change Addition Street ADDRESS 1221 BRICKELL AVE. 23 STREET ADDRESS Change Addition Street ADDRESS 1221 BRICKELL AVE. 23 STREET ADDRESS Change Addition Street ADDRESS 1221 BRICKELL AVE. 33 STREET ADDRESS Change Addition Street ADDRESS 1221 BRICKELL AVE. 33 STREET ADDRESS Change Addition NAME HARRIS, LUCIOUS T 32 NAME STREET ADDRESS Change Addition Street ADDRESS 1221 BRICKELL AVE. 33 STREET ADDRESS Change Addition Street ADDRESS 1221 BRICKELL AVE. 3 STREET ADDRESS Change Addition Street ADDRESS 1221 BRICKELL AVE. 3 STREET ADDRESS Change Addition STREET ADDRESS 1221 STREET ADDRESS STREET ADDRESS Change									
NMAE PROMOFF, DAVID H. 22 NAME STREET ADDRESS 1221 BRICKELL AVE. 23 STREET ADDRESS DTY-ST-2P MIAMI FL 2.4 CITY-ST-2P ITTLE D DELETE 3.1 TITLE STREET ADDRESS 1221 BRICKELL AVE. Change Addition STREET ADDRESS 1221 BRICKELL AVE. 3.5 STREET ADDRESS Change Addition STREET ADDRESS 1221 BRICKELL AVE. 3.5 STREET ADDRESS Change Addition NAME STREET ADDRESS 1221 BRICKELL AVE. 3.5 STREET ADDRESS Change Addition NAME CARSTARPHEN, LISA R 4 2 NAME 4 CITY-ST-2P Change Addition NAME STREET ADDRESS 1221 BRICKELL AVE 4 3 STREET ADDRESS CITY-ST-2P Addition NAME STREET ADDRESS 121 BRICKELL AVE 4 STREET ADDRESS CITY-ST-2P Change Addition NAME STREET ADDRESS 121 BRICKELL AVE 5 STREET ADDRESS Change Addition STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-2P Change Addition STREET ADDR	STREET ADDRESS		Æ.				DDRESS		E
NAME PROMOFF, DAVID H. 22 NAME STREET ADDRESS 1221 BRICKELL AVE. 23 STREET ADDRESS DTY-ST-ZP MIAMI FL 2.4 CITY-ST-ZIP TITLE D DELETE 3.1 TITLE NAME HARRIS, LUCIOUS T 32 STREET ADDRESS Change Addition STREET ADDRESS 1221 BRICKELL AVE. 33 STREET ADDRESS CHY-ST-ZP HTLE S 1221 BRICKELL AVE. 34 CITY-ST-ZP HTLE S 1221 BRICKELL AVE. 34 CITY-ST-ZP HTLE S 121 DELETE 41 TITLE NAME CARSTARPHEN, LISA R 4 2 NAME Addition STREET ADDRESS 1221 BRICKELL AVE 43 STREET ADDRESS CHY-ST-ZP HTLE MIAMI FL 4 CHY-ST-ZP Change Addition NAME STREET ADDRESS 121 BRICKELL AVE 43 STREET ADDRESS CHY-ST-ZP ITLE DELETE 51 TITLE Change Addition NAME STREET ADDRESS 52 NAME STREET ADDRESS CHY-ST-ZP ITLE DELETE 51 TITLE Change Addition <td< td=""><td></td><td></td><td></td><td colspan="2"></td><td colspan="2"></td><td></td><td>]ş</td></td<>]ş
STREET ADDRESS 1221 BRICKELL AVE. 2.3 STREET ADDRESS DTY-ST-ZIP MLAMI FL 2.4 CITY-ST-ZIP ITITLE O DELETE 3.1 TITLE NAME HARRIS, LUCIOUS T 3.2 NAME STREET ADDRESS 1221 BRICKELL AVE. 3.3 STREET ADDRESS CITY-ST-ZIP MIAMI FL 3.4 CITY-ST-ZIP HTLE S 1221 BRICKELL AVE. CITY-ST-ZIP MIAMI FL 3.4 CITY-ST-ZIP HTLE S 120 DELETE STREET ADDRESS 1221 BRICKELL AVE. CITY-ST-ZIP MIAMI FL 3.4 CITY-ST-ZIP HTLE S 1221 BRICKELL AVE STREET ADDRESS 1221 BRICKELL AVE STREET ADDRESS 1221 BRICKELL AVE ITULE STREET ADDRESS ITULE DELETE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MAMI FL ITULE DELETE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP		•	н	L DELETE				L Change L Addilio	<u>م</u> ال
ITTLE D DELETE 3.1 TITLE Change Addition NAME HARRIS, LUCIOUS T 32 NAME 32 NAME 33 STREET ADDRESS 1221 BRICKELL AVE. 33 STREET ADDRESS 33 STREET ADDRESS 34 CITY-ST-2IP Change Addition NAME STREET ADDRESS 1221 BRICKELL AVE. 34 CITY-ST-2IP Change Addition NAME CARSTARPHEN, LISA R 34 CITY-ST-2IP Change Addition NAME CARSTARPHEN, LISA R 42 NAME Change Addition STREET ADDRESS 1221 BRICKELL AVE 43 STREET ADDRESS City-ST-2IP Change Addition NTLE DELETE 51 TITLE Change Addition Addition NAME STREET ADDRESS 53 STREET ADDRESS City-ST-2IP Change Addition NAME DELETE 51 TITLE Change Addition Street ADDRESS City-ST-2IP Change Addition NAME DELETE 51 TITLE Change Street ADDRESS City-ST-2IP Change Addition NAME Castreet ADDRESS Street ADDRESS Street ADDRESS							DRESS		
NAME HARRIS, LUCIOUS T 32 NAVE STREET ADDRESS 1221 BRICKELL AVE. 33 STREET ADDRESS CITY-ST-ZIP MIAMI FL 34 CITY-ST-ZIP HTLE S 22 DELETE Addition CARSTARPHEN, LISA R 4 2 NAME STREET ADDRESS 1221 BRICKELL AVE 4 STREET ADDRESS CITY-ST-ZIP MAMN FL 4 2 NAME TITLE STREET ADDRESS 1221 BRICKELL AVE STREET ADDRESS 1221 BRICKELL AVE CITY-ST-ZIP MAMN FL TITLE DELETE STREET ADDRESS 53 STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP Grange Addition 52 NAME STREET ADDRESS 53 STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP TITLE DELETE STREET ADDRESS 53 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP TITLE Change NAME 62 NAME STREET ADDRESS 63 STREET ADDRESS CITY-ST-ZIP 64 CITY-ST-ZIP TITLE Change NAME 63 STREET ADDRESS CITY-ST-ZIP 64 CITY-ST-ZIP TITLE		the second se	· . · ·					· · ·	
STREET ADDRESS 1221 BRICKELL AVE. 33 STREET ADDRESS CITY-ST-ZIP MIAMI FL 34 CITY-ST-ZIP TITLE \$\$ \$\$ NAME CARSTARPHEN, LISA R 4 2 NAME STREET ADDRESS 1221 BRICKELL AVE 4 3 STREET ADDRESS CITY-ST-ZIP MIAMI FL 4 2 NAME STREET ADDRESS 1221 BRICKELL AVE 4 3 STREET ADDRESS CITY-ST-ZIP MIAMI FL 4 4 CITY-ST-ZIP TITLE \$\$ 5 1 TITLE STREET ADDRESS 5 2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP \$\$ TITLE \$\$ STREET ADDRESS \$\$ CITY-ST-ZIP \$\$ TITLE \$\$ STREET ADDRESS \$\$ STREET ADDRESS \$\$ CITY-ST-ZIP \$\$ TITLE \$\$ STREET ADDRESS \$\$ CITY-ST-ZIP \$\$ TITLE \$\$ STREET ADDRESS \$\$ CITY-ST-ZIP \$\$ TITLE \$\$ STREET ADDRESS		-						L Change Addition	1
CITY-ST-ZIP MIAMI FL 34 CITY-ST-ZIP TITLE \$ 21 DELETE 4.1 TITLE NAME CARSTARPHEN, LISA R 4.2 NAME STREET ADDRESS 1221 BRICKELL AVE 4.3 STREET ADDRESS CITY-ST-ZIP MIAMI FL 4.4 CITY-ST-ZIP MIAMI FL							DRESS		
NAME CARSTARPHEN, LISA R 4 2 NAME STREET ADDRESS 1221 BRICKELL AVE 4 3 STREET ADDRESS CITY-ST-ZIP MIAMI FL 4 4 CITY-ST-ZIP TITLE DELETE 51 TITLE STREET ADDRESS Change Addition NAME STREET ADDRESS Change STREET ADDRESS S3 STREET ADDRESS Addition STREET ADDRESS S3 STREET ADDRESS Addition OTY-ST-ZIP S4 CITY-ST-ZIP Change Addition TITLE DELETE 5.1 TITLE Change Addition NAME S3 STREET ADDRESS S3 STREET ADDRESS Change Addition STREET ADDRESS S4 CITY-ST-ZIP Change Addition NAME DELETE 6.1 TITLE Change Addition STREET ADDRESS 63 STREET ADDRESS City-ST-ZIP Change Addition STREET ADDRESS 63 STREET ADDRESS City-ST-ZIP Change Indicaded on the second had the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i)	CITY-ST-ZIP	MIAMI FL			3.4. CI	3.4. CITY-ST-ZIP			
STREET ADDRESS 1221 BRICKELL AVE 43 STREET ADDRESS CITY-ST-ZIP MIAMI FL 44 CITY-ST-ZIP TITLE DELETE 51 TITLE NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE DELETE 5.4 CITY-ST-ZIP TITLE DELETE STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE STREET ADDRESS Change CITY-ST-ZIP Addition NAME 6.1 TITLE STREET ADDRESS Change CITY-ST-ZIP Change ITTLE DELETE STREET ADDRESS Change CITY-ST-ZIP Change STREET ADDRESS Change CITY-ST-ZIP Change ITTLE Change ITTLE STREET ADDRESS CITY-ST-ZIP Change STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST	1	•		LA DELETE				Change Addition	1
CITY-ST-ZIP MIAMI FL 44 CITY-ST-ZIP TITLE DELETE 51 TITLE Change Addition NAME 52 NAME 5.3 STREET ADDRESS	1						IDRESS		
NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TNTLE DELETE 0 DELETE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS Change Addition NAME STREET ADDRESS CITY-ST-ZIP Change Addition 6.3 STREET ADDRESS CITY-ST-ZIP Change Addition 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. L hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicate on this annual report of supplemental annual report is true and accurate and that my signature shell have the serie flored as if made under oath, theil emption is true and accurate and that my signature shell have the serie flored as if made under oath, theil emption is true and accurate and that my signature shell have the series flored as if made under oath, theil emption and accurate and the signature shell have the series flored as if made under oath, theil emption and accurate and that my signature shell have the series flored as if made under oath, theil emption and accurate and that my signature shell have the series flored as if made under oath, theil emption and accurate and that my signature shell have the series flored as if made under oath, theil emption and accurate and that my signature shell have the series flored as if made under oath, theil emption and		MAMI FL			1				
STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TNTLE DELETE NAME 6.1 TITLE STREET ADDRESS Change CITY-ST-ZIP Change NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.3 STREET ADDRESS CITY-ST-ZIP 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP T4. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information is true and accurate and that we single and there shall have the same logal officet as if made under oath; that I amual report is true and accurate and that we single and there shall have the same logal officet as if made under oath; that I amual report is true and accurate and the weight and the single and that we single and there shall have the single under oath; that I amual report of supplemental annual report is true and accurate and that we single and that we single and that we single and that we single and the single under oath; that I amual report is true and accurate and that we single and that we si				L_] DELETE				Change Addition	ן י
CITY-ST-ZIP 5.4 CITY-ST-ZIP INTLE DELETE NAME 6.1 TITLE STREET ADDRESS Change CITY-ST-ZIP 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. L hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same logit offect as if made under oath; that I am an accurate and that my signature shall have the same logit offect as if made under oath; that I am an accurate and that my signature shall have the same logit offect as if made under oath; that I am an accurate and that my signature shall have the same logit offect as if made under oath; that I am an accurate and that my signature shall have the same logit offect as if made under oath; that I am an accurate and that my signature shall have the same logit offect as if made under oath; that I am an accurate and that my signature shall have the same logit offect as if made under oath; that I am an accurate and that my signature shall have the same logit offect as if made under oath; that I am an accurate and that my signature shall have the same logit offect as if made under oath; that I am an accurate and that my signature shall have the same logit offect as if made under oath; that I am an accurate and that my signature shall have the same logit offect as if made under oath; that I am an accurate and that my signature shall have the same logit offect as if made under oath; that I am an accurate and that my signature shall have the same logit offect as if made under oath; that is an accurate and that my signature shall have the same							DRESS		
NAME 62 NAME STREET ADDRESS 63 STREET ADDRESS CITY-ST-ZIP 64 CITY-ST-ZIP 14. Lhereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report of supplemental annual report is true and accurate and that my signature shall have the seme logal offect as if made under oath; that Lem an				····			1		
STREET ADDRESS 63 STREET ADDRESS 64 CitY-ST-ZiP 64 CitY-ST-ZiP 64 CitY-ST-ZiP 14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report of supplemental annual report is true and accurate and that my signature shall have the same logal offect as if made under oath; that Lem an				DELETE				Change 🔲 Addition	ī
CITY-ST-ZIP 64 CITY-ST-ZIP 14. L hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 logal offect as if made upder oath; that Lem an									
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report of supplementation and accurate and that my signature shall have the same logit officer as it made upper oath; that I am an	CITY-ST-ZIP				6.4 CIT	Y-ST-2	ZIP		
a set the set of the s	14. I hereby c indicated	on this annual report or s	sunnlemental annual ren	nort is true and ac	for the exe	mptio	n stated in	ure shall have the same local offect as if made under path; that I am an	1