## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT \* CORPORATION ANNUAL REPORT



FLORIDA DE PARTMENT OF STATE

Sandra B. Mortham

Secretary of State

	1996		3.7	DIVISION OF CORPORATIONS							
DOCUMENT # V03696  1. Corporation Name				(4)							
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Principal Place	e of Business		Mailir	ng Address				1 id bit dirigit datas titta artis tari		(1 2181) \$1911 \$1411 \$1611 B1611 1481	
7040 W. PALMETTO PARK RD.			-	7040 W. PALMETTO PARK RD.							
SUITE 2-504 BOCA RATO	) On FL 33433			IITE 2-504 XCA RATON FL 3343	33				- [0-	Date of Last Report	<u> </u>
US	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		US					3. Date Incorporated or Qualified 12/30/1991	За.	03/15/1994	
2. Principal P	lace of Business		2a. N	failing Address				4. FEI Number	_1	Applied For	
21			26					65-0305397		Not Applicat	e
Suite, Apt.	#, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 Additional Fee Required	1
City & Stat	le		27	Dity & State				6. Flection Campaign Financing		\$5.00 May Be	
23			28					Trust Fund Contribution		Added to Fees	
Zip		Country	—- n	'ip	Count	ry		8. This corporation has liability for Florida Statutes			
24	0 Name at	d Address of Curren	29 t Registe	red Agent	30]			10. Name and Address of New	_		
	3, 110me at				8	H N	lanie				
SHELTO	ON, MURRAY				٤	12 S	treet Addre	oss (P.O. Box Number is Not Accepta	ble)		ᅱ
7040 PALMETTO PARK RD.											
SUITE 2-504					8	33					
BOCA	RATON FL 33		84 City			ity			FL 85 Zip Code		
44 5	the the man dala or	o of Coations 607 0505	2 and 607	1508 Florida Statut	res the above		ied comor	ation submits this statement for the process of directors. Thereby accept the ac-	ILIXOES C	of changing its registered of	fice
		s of Sections 607.0502 oth, in the State of Flori the obligations of, Sect				prpora	tion's boar	d of directors. Thereby accept the ap	pointme	nt as registered agent. I an	۱
		the obligations of, Sect	0:1001:00	305, Florida Statutes							
SIGNATURE	Signature typed or p	writed name of registered agent				gent sig	evalure neogranic	ADDITIONS/CHANGES TO OF	DA		
12.	T 0	OFFICERS AN	D DIRECT	ORS DELETE	13. 1.13:I					CONTRACTOR AND A SHARE A	on d
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NAME					6 2 NA			-03/13/9601 ***200.00	.1451	uco	Ø_,
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14. 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. Further certify that the information indicated by 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 eath; that I am an officer or director of the corporation 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 12 for an advantage of the corporation of 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 12 for an advantage of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name 6.4 City - \$1, ZiP

SIGNATURE: X

STREET ADORESS

OFFICER OR DIRECTOR

488 - 9987 Daytine Phone \*