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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

| 1. Corporation | /ENT | # V1499 | 96 | (5) | | | | | | | | |
|---|---|--|-------------------------------|--|--|--|--|--|--------------------|--|-------------------------------------|--|
| | UPPY IN | C. | | | | | | | | | | |
| Principal Place | of Business | | Mailı | ng Address | | | 1 100 0 100 100 1 | DA IDAK DAKA | | | | |
| 1582 MADRUGA AVE CORAL GABLES FL 33146 1582 MADRUGA AVE CORAL GABLES FL 33146 | | | | | 3146 | | | | | | | |
| | | | | | | | 3. Date Incorporated or 02/17/1992 | Qualified | 3a. Date o | of Last Re /27/19 | • | |
| 2. Principal Pla | ce of Busine | ISS | 2a. A | Mailing Address | | | 4. FE! Number | | | | Applied For | |
| Suite, Apt. # | Suite, Apt. #, etc. City & State | | | Suite, Apt. #, etc. | | | | 65-0316036 | | | Not Applicable \$8.75 Additional | |
| 2 | | | | | | 5. Certificate of Status I | Desired | | Fee Required | | | |
| City & State | | | | City & State | | | | 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Added to Fe | | | | |
| Ζφ 24 | 1 | Country 25 | 29 | (ip | 30 Cou | ntry | 8. This corporation has Florida Statutes | ☐ Yes | □No | | 199.032, | |
| | 9, Name | and Address of Curre | ent Hegiste | red Agent | | 81 Name | 10. Name and Address | of New H | egistered A | gent | | |
| MURDO | CK. PATRI | CK F. | | | | | idress (P.O. Box Number is No | d Acceptabl | | | | |
| MURDOCK, PATRICK E. 1582 MADRUGA AVE | | | | | | 52 Street Ad | dress (P.O. Box Number is No | ii Acceptani | e, | | | |
| CORAL (| GABLES F | L 33146 | | | | 83 | | | | | | |
| | | | | | | 84 City | | ····· | | 85 Zg | Code | |
| 11. Pursuant to | the provision | ons of Sections 607.050 | 02 and 607. | 508, Florida Statut | es, the abo | ve-named corp | oration submits this statement | for the pur | FL cose of chan | l <u>l</u> iging its r | egistered office | |
| 11. Pursuant to or registere familiar with SIGNATURE | d agent, or n, and accer | ons of Sections 607.050 both, in the State of Fic of the obligations of, Se or printed name of registered ago | rida. Such c ction 607.05 | hange was authoriz 05, Florida Statutes | ed by the o | corporation's bo | oration submits this statement bard of directors. I hereby acce | for the purpopt the appo | cose of chan | lging its reegistered | egistered office agent. I am | |
| 11. Pursuant to or registere familiar with SIGNATURE _ s | d agent, or n, and accep Signature, typed i | both, in the State of Flo ot the obligations of, Se | orida. Such control of 607.05 | hange was authoriz 05, Florida Statutes mable (NC DRS | ed by the o | corporation's bo | pard of directors. I hereby acce | ipt the appo | DATE CERS AND I | egistered | agent. I am | |
| 11. Pursuant to or registere familiar with SIGNATURE 5. 12. | d agent, or n, and accer signature, typed i | both, in the State of Fic of the obligations of, Se or printed name of registered ago OFFICERS A | orida. Such control of 607.05 | hange was authoriz 05, Florida Statutes | of by the control of | Agent signature req | pard of directors. I hereby acce | ipt the appo | DATE CERS AND I | egistered | agent. I am | |
| 11. Pursuant to or registere familiar with SIGNATURE _ s 12. | d agent, or n, and accer signature, typed or CPD MURDO | both, in the State of Fiket the obligations of, Se or printed manic of registered agr. OFFICERS A | orida. Such control of 607.05 | hange was authoriz 05, Florida Statutes mable (NC DRS | of by the control of the Begistered 13. 1.11 12 No. | Agent signature req | pard of directors. I hereby acce | ipt the appo | DATE CERS AND I | egistered | agent. I am | |
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| 11. Pursuant to or registere familiar with SIGNATURE 12. 117. ITTLE NAME SIREET ADDRESS CITY-ST-ZIP | c agent, or n, and accept signature, typed in CPD MURDO 1582 M | both, in the State of Fic at the obligations of, Se or printed name of registered age OFFICERS A OCK, PATRICK E. ADRUGA AVE | orida. Such control of 607.05 | hange was authoriz 05, Florida Statutes | DIL Registered 13. 1.11 12 N 13 S 1.4 G | Agent signature requires Agent signature requires AME REET ADDRESS TY - ST - ZIP | pard of directors. I hereby acce | ipt the appo | DATE CERS AND L | OIRECTO Change | RS IN 12 | |
| 11. Pursuant to or registere familiar with SIGNATURES 12. TITLE | c agent, or n, and accept signature, typed in CPD MURDO 1582 M | both, in the State of Fic at the obligations of, Se or printed name of registered age OFFICERS A OCK, PATRICK E. ADRUGA AVE | orida. Such control of 607.05 | hange was authoriz 05, Florida Statutes | 13. 1.11 12.N 1.4.G 2.11 2.2.N. 2.3.S | Agent signature requirement address the signature requirement and sign | pard of directors. I hereby acce | ipt the appo | DATE CERS AND L | OIRECTO Change | RS IN 12 | |
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SIGNATURE:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/96 305-667-8284