US	
Principal Place of Business	
### A18 NE 5th Street	
Fort Lauderdale Florida 33301 US 2. Principal Place of Business 2. Ramaing Address 2. Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 2. City & State 3. City & Sta	
2.	Date Incorporated or Qualified 3a. Date of Last Report
26	03/03/1992 4/20/95
27	FET Number Applied For 65-0318423 Not Applicable
28	Certificate of Status Desired \$8.75 Additional Fee Required
26	Election Campaign Financing Trust Fund Contribution  Trust Fund Contribution  \$5.00 May Be Added to Fees
PSTD	This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No  Name and Address of New Registered Agent
Morris	Name and Address of New Registered Agent
### A 13 NE 5th Street Fort Lauderdale, Florida 33301  ### City  11. Pursuant to the provisions of Sections 607.0509 and 607.1509. Florida Statutes, the above named corporation is or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of din familiar with, and accept the obligations of, Section 607.0505. Florida Statutes  SIGNATURE    System lipeted provisions of Sections 607.0505. Florida Statutes  12.	D. Box Number is Not Acceptable)
### Provided a service of the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above named corporation so or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of direct amiliar with, and accept the obligations of, Section 607.0505. Florida Statutes  SIGNATURE    12	
11. Pursuant to the previsions of Sections 607.050% and 607.1508, Florida Statutes, the above named comporation so or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of dimensional with and accept the obligations of, Section 607.0505, Florida Statutes  SIGNATURE    Signature byte to previous at register and another legislation.   Patr   Register April Signature required which recorporation as the provided agent and the Legislation.	
Familiar with, and accept the obligations of, Socient 607.0505. Florida Statutes  SIGNATURE  Signature byet exposes have disponent apertain the Legal adm.  PSTD  OFFICERS AND DIRECTORS  13.  ITHE  NAME  MORRIS, Jim  STREET ADDRESS  CHY-ST-ZIP  THLE  NAME  SIREET ADDRESS  CHY-ST-ZIP  THLE  NAME  STREET ADDRESS  CHY-ST-ZIP  THLE  DELETE  A 1 THLE  A 2 NAME  A 2 NAME  A 3 STREET ADDRESS  CHY-ST-ZIP  THLE  NAME  STREET ADDRESS  CHY-ST-ZIP  THLE  DELETE  A 4 CHY-ST-ZIP  THLE  DELETE  A 4 CHY-ST-ZIP  THLE  DELETE  A 5 1 THLE  NAME  STREET ADDRESS  CHY-ST-ZIP  THLE  DELETE  A 4 CHY-ST-ZIP  THLE  DELETE  A 5 1 THLE  NAME  STREET ADDRESS  CHY-ST-ZIP  THLE  DELETE  S 5 NAME  STREET ADDRESS  CHY-ST-ZIP  THLE  DELETE  S 5 NAME  STREET ADDRESS  CHY-ST-ZIP  THLE  DELETE  S 5 NAME  STREET ADDRESS  CHY-ST-ZIP  THLE  S 5 NAME  STREET ADDRESS  CHY-ST-ZIP  S 4 CHY-ST-ZIP  THLE  S 5 NAME  STREET ADDRESS  CHY-ST-ZIP  S 4 CHY-ST-ZIP	FL 85 Zip Code
SIGNATURE	bmits this statement for the purpose of changing its registered office actors. Thereby accept the appointment as registered agent. Lam
12.	
DELETE   DELETE   1 1 TITLE   DELETE   1 2 NAME   1 3 STREET ADDRESS   DELETE   2 1 TITLE   DELETE   2 1 TITLE   DELETE   2 1 TITLE   DELETE   3 1 TITLE   4 1 TITL	stating FATE
MOTTES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
Title	
TITLE	
NAME	
CITY-ST-ZIP	Change Addition
TILE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  4 1 TITLE  42 NAME  43 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  5 1 TITLE  NAME  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  CITY-ST-ZIP  54 CITY-ST-ZIP	
NAME   32 NAME   32 NAME   33 STREET ADDRESS   33 STREET ADDRESS   34 CHY - ST - ZIP   11 THE	
CITY-ST-ZIP   34 CITY-ST-ZIP   34 CITY-ST-ZIP     TITLE	☐ Change ☐ Addition
TITLE	
NAME	
STREET ADDRESS         4 3 STREET ADDRESS           CITY-ST-ZIP         4 4 CITY-ST-ZIP           TITLE         DELETE         5 1 TITLE           NAME         5 2 NAME           STREET ADDRESS         5 3 STREET ADDRESS           CITY-ST-ZIP         5 4 CITY-ST-ZIP	Change Addition .
TITLE	
NAME         5 2 NAME           STREET ADDRESS         5 3 STREET ADDRESS           CITY-ST-ZIP         5 4 CITY-ST-ZIP	700001800147 -04/29/9601136003thange Addition
STREET ADDRESS	- 04723736 01136-0日 € hange
CITY-ST-ZIP 54 CITY-ST-ZIP	
THE DELETE ■ 6 1 THE	
MANAG	Change Addition
STREET ADDRESS 6.3 STREET ADDRESS 6.3 STREET ADDRESS	27.79
CITY-ST-ZIP 64 CITY-ST-ZIP	7.7.
14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the except by that the information indicated on this annual report of suppliemental annual report is true and appropriate and the certify that the information indicated on this annual report of suppliemental annual report is true and appropriate and the certification.	of my elementics shall be no the period local affect on it must be used.
oath, that I am an officer or director of the corporation of the receiver or trustee empowered to execute this report appears in Block 12 or Block 13 ill chapped, or on an a talk ment with an address.	and a service of a rich nove the same legal enect as it made finder