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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

V38336

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10490 Le Principal Place of Business	xhaTm	Circle South	Boynton	Beach IL
Principal Place of Business	ď	Mailing Address	- 1	33436
10668 LADY PALM LANE STE. A		10668 LADY P Ste. M	ALM LANE	11/100



Principal Place	of Business 💋	Mailing Addin	ess	33436	A TORTH BEINDS IND FOLEN TIERS FILLS	OLIT OLGIL OLDIL ALDIL DIOLI AFOLI DIBIL INGI
10668 LADY PALM LANE STE. A BOCA RATON PL 33498		STE. X	10668 LADY PALM LANE			
					3. Date Incorporated or Qualified 05/22/1992	3a. Date of Last Report 07/31/1995
2. Principal Pla	nce of Business	2a. Mailing A	^ .		4. FEI Number	Applied For
Suite, Ant #	SAME	26	Spire		65-0338245	Not Applicable
22	i, etc.	Suite, Ap	и. #, екс		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & Sta	ate		6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zıp	Country	Zφ	·	Country	8. This corporation has liability for in	
24	25	29	30		Florida Statutes 🔲 Yes	□No
	9. Name and Address of Cur	rent Registered Age	ent		10. Name and Address of New Ro	egistered Agent
				81 Nanie		
10668A	IARTIN S. LADY PALM LANE 10' ATON FL 33498 3	190 Lexing porton Beach	thURU So 1,FL 3343	. 82 Street Add 83 City	ress (P.O. Box Number is Not Acceptabl	FL 85 Zip Code
or registere	o the provisions of Sections 607.0 ed agent, or both, in the State of F h, and accept the obligations of, S	iornat. Such change w	vas authorized by I	above named corpor the corporation's boa	ration submits this statement for the purp and of directors. Thereby accept the appe	pase of changing its registered office.
SIGNATURE _	anday tamar ora la la					
12.	Signatine, typed or purded came of registered a OFFICERS	AND DIRECTORS		stere l'Agent signature respire 13.	ADDITIONS/CHANGES TO OFFI	DATE CERS AND DIRECTORS IN 12
TITLE	P		DELETI	1 1 1 1 1 1	7,55,713,73,57,73,73	Change Addition
NAME	BECK, RICHARD,	10490 Lex	actorCircleSt.	1.2 NAME		
STREET ADDRESS	10888 LAQY PALM LANE	1941-124	,,,,,	1 3 STREET ADDRESS		
CITY - ST - ZIP	BOCA RATION FL	Banton Bed	4.FL 3311	14 CHY+ST-ZIP		
TITLE			DELETE .	2 1 1-TLF		Change Addition
NAME			:	2.2 NAME		
STREET ADDRESS				2 3 STREET ADDRESS		
CITY - ST - ZIP				2 4 CHTY - \$1 - ZIP		
TITLE			DELETE .	3 1 TITLE		Change Addition
NAME				3.2 NAME		
STREET ADDRESS				3.3 STREET ADDRESS		
CITY - ST - ZIP		- · · · · · · · · · · · · · · · · · · ·		3.4 CHY ST ZIF		
TITLE				4 1 TILE		Change Addition
NAME				4.2 NAME		
STREET ADDRESS				4 3 STREET ADORESS		
CHY-ST-ZIP				4.4 CITY - ST - ZIP		
TUTLE		Ш		5 1 FILE		Change Addition
NAME STREET ADDRESS			li li	5 2 NAME		
				5 3 STREET ADDRESS		
CITY - \$1 - ZIP TITLE				5.4 CITY - ST - ZIF 6.1 TH LE		El Change El Addition
NAME				6.2 NAME		Change Addition
STREET ADDRESS				6.3 STREET ADDRESS		
CITY - ST - ZIP						
Official (ZIP)			L	6 4 CITY - ST - ZIP		

1 do hereby centry that the information supplied with this fiting 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, 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 33 if changed, or on an attachment with an address

SIGNATURE: