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PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V49093

(0)

DAVID W. LANGLEY, P.A.

**SIGNATURE:** 

FILED
Mar 11 1997 8:00am
Secretary of State



Principal Place of Business  ONE EAST BROWARD BOULEVARD SUITE 700 FORT LAUDERDALE FL 33301		Mailing Address			. Hand minnin eigen sault absire i bine fill filbli brath bibli bibli bibli (201		
		one east broward bl suite 700	.VD.				
		FT LAUDERDALE FL 3330	11-1843				
US		US			3. Date Incorporated or Qualified 07/01/1992	3a. Date of L 03/25/19	
2. Principal P	lace of Business	2e. Mailing Address		·····	4. FEI Number	1 00/20/11	Applied For
		26	26		7,755,700 1 0		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		***************************************	5. Certificate of Status Desired S8.75 Additional		
		27			Fee Required		
City & Stat	e	City & State			6. Election Campaign Financing		.00 May Be
Z <sub>I</sub> p	Country		Country		Trust Fund Contribution		dded to Fees
]	25	29	30	•	8. This corporation has liability for		der s. 199.032,
1	9. Name and Address of (		[30]		Florida Statutes  10. Name and Address of New R		
I AA	IGLEY, DAVID W.		81	Name	IV. Taking and realized of their re	ogistorou Agont	
	E EAST BROWARD BLVD.					· · · · · · · · · · · · · · · · · · ·	
	TE 700		62	Street Add	Iress (P.O. Box Number is Not Accepta	ible)	
	LAUDERDALE FL 33301		83	***************************************			
			84	City		85	Zip Code
• D	10-5-00	7,000		·			•
Office of r	ealstered abent, or both, in the	i State of Florida. Such change was s	authorizad hu	the cornora	poration submits this statement for the ition's board of directors. I hereby acce	purpose of chang opt the appointme	jing its registere int as registered
agent. La	m familiar with, and accept the	obligations of, Section 607.0505, Flo	orida Statutes				
IGNATURE -							
CHAICHE	Signature, typed or proted name of registi	ered agent and title if applicable (NOT	E Registered Age	nt signature requi	ired when reinstating)	DATE	
	Signature: typed to proted name of registr OFFICEF	ered agent and title if applicable (NOT RS AND DIRECTORS	E Registered Age	nt signature requi	ited when reinstaling) ADDITIONS/CHANGES TO OFFI	DATE CERS AND DIREC	CTORS IN 12
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