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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

(9)

**DOCUMENT #** VERBLOW & ASSOCIATES O.D. P.A. APPROYED

1296 HAY -1 111 8: 28

SECHEM TALLAMAS



Principal Place of Business Mailing Address										
1181 N.W. 101ST AVENUE 1181 N.W. 101ST AVENUE PLANTATION FL 33322 PLANTATION FL 33										
						3. Date Incorporated or Qualified 07/22/1992		of Last Re 5/01/199		
2. Principal Pla	ace of Business	2a. Mailing Address	a. Mailing Address			4. FEI Number Applie			pplied For	
21		26				65-0348204			lot Applicab∉e	
Suite, Apt #	#, etc.	Suite, Apt #, etc				5. Certificate of Status Desired			Additional Required	
City & State	·	City 8 State				Election Campaign Financing Trust Fund Contribution	C3		) May Be I to Fees	
Ζίρ <b>24</b>	Country 25	71p	Cou <b>30</b>	ntry		8. This corporation has liability for Florida Statutes 🗾 Yes		cunder s	199.032,	
	g. Name and Address of Current	Registered Agent				10. Name and Address of New R	egistered A	igent		
				81	Name					
VERBLOW, ASHLEY				82	Street Addre	Address (P.O. Box Number is Not Acceptable)				
	W 101 AVENUE									
PLANIA	TION FL 33322			83						
				84	City		FL	<b>85</b> Zip	Code	
familiar wit	to the provisions of Sections 607.05x12 ed agent, or both, in the State of Fiorial th, and accept the obligations of, Section 50 per the obligations of Section 50 per the obligations of Section 50 per the obligation of the oblight of the obligation of the obligati	on 607.0505, Florida Statutes.				d of directors. Thereby accept the applications are sensitive.	ointrient as	registered	agent Lam	
12.	OFFICERS AND	OFFICERS AND DIRECTORS				ADDITIONS/CHANGES TO OFF	CERS AND	DIRECTOR	RS IN 12	
TITLE	D SPECIAL SPANISHES I	DELETE.		17 L E				] Change	Addition	
NAME	VERBLOW, FRANCINE J.		1 2 N	AME		200	001	821	. 632 -004	
STREET ADDRESS	1181 N.W. 101ST AVENUE		1351	TREET A	DDHESS					
CITY - ST - ZIP	PLANTATION FL		_	Y ST	712				2 <u>00.00</u>	
TITLE		DEFELE	2.11		ĺ			] Change	☐ Addition	
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NAME			42 N							
STREET ADDRESS					DORESS					
				10 01						

6.4 CITY - ST - 7:P CITY-S1-ZIP 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, 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 logal 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 13 if changed, or on an attrichment with an address.

5 1 THEF 5.2 NAME

6 1 T TLF 6.2 NAME

5.3 STREET ADDRESS 5.4 C-TY - ST - ZIP

6.3 STREET ADDRESS

SIGNATURE:

TITE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Verblow 4-29-46 (954)424-0783

DELETE

DELETE

Change

Addition

Change Addition

CR2E034 (12/95)