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PROFIT CORPORATION **ANNUAL REPORT**



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

1996

DOCUMENT # V54871

(1)

Principal Place 929 NO. DIXI LAKE WORTH	HE HWY	SUITE 6	1521 FOREST HILL BLYD SUITE 6				
US		WEST PALM BEACI US	H FL 33406		3. Date Incorporated or Qualified 07/21/1992	3a. Date of Las 05/01/	
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	00/01/	Applied For
Suite, Apt. #, etc.		26		59-3138136	Not Applicable		
		Suite, Apt. #, etc.	han a		5. Certificate of Status Desired	\$8.75 Additional	
2 City & State	3	City & State			e Clastica Convenient Consider		ee Required
3		28			6. Election Campaign Financing Trust Fund Contribution		.00 May Be
Zip	Country	Zφ	Country		8. This corporation has liability for		
4	25	29	30			□No	
	9. Name and Address of Curr	ent Registered Agent	81	T Name	10. Name and Address of New F	legistered Agent	
CLEMEN	NT MICHAEI		61	Name			
CLEMENT, MICHAEL 929 NO. DIXIE HWY			82	Street Addr	ress (P.O. Box Number is Not Acceptab	ile)	
	ORTH FL 33460		83				
			84	0.1			
				,		FL 85	Zip Code
rammar witt	ed agent, or both, in the Stare of Fic th, and accept the obligations of, Sc	orida. Such change was autho oction 607.0505, Florida Statul	rized by the corp tes.	oration's boar	ration submits this statement for the pur rd of directors. I hereby accept the app:	peac of changing pintnient as registe	ored agent. Lam
	Slandfore, typed or printed name of registered as	end and title I applicable	(NOTE Experience Aug	of Sadk and are resolutions	of What I fee of Mail	DA's	
	Signature, typed or printed name of my stored by OFFICERS A	AND DIRECTORS	(NOTE: Registered Age)	it signature requee	owner is string ADDITIONS/CHANGES TO OFF	DA'E	OTORS IN 12
SIGNATURE :	OFFICERS A			il signature require			· · · · · · · · · · · · · · · · · · ·
12. TITLE	OFFICERS A P CLEMENT, MICHEL	AND DIRECTORS	13.	il Sejentaro require		ICERS AND DIREC	
12. TITLE NAME STREET ADDRESS	OFFICERS A P CLEMENT, MICHEL 929 NO DIXIE HWY	AND DIRECTORS	13. 1 1 TILLE 1 2 NAME 1 3 STREEL	ADORESS		ICERS AND DIREC	
12. HITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS A P CLEMENT, MICHEL	ND DIRECTORS	13. 1 1 TILLE 1 2 NAME 1 3 STREAT 1 4 CHY-5	ADORESS		ICERS AND DIFFE	ge Addition
112. TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CLEMENT, MICHEL 929 NO DIXIE HWY LAKE WORTH FL D	AND DIRECTORS	13. 1 1 THE 1 2 NAME 1 3 STREE 1 4 CHY - S 2 1 THE	ADORESS		ICERS AND DIREC	ge Addition
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LENENT 5-1-96 467-582-4360 SIGNATURE: MICHE SKINATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR