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PROFIT CORPORATION ANNUAL REPORT

· 1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

V57151 DOCUMENT #
1. Corporation Name

(5)

COMMERCE STATION, INC.

| Principal Place o | of Business | | Mailing Address | | | | | | | |
|--|--|---|--|---|--|--|---------------------------------------|----------------------|--------------------------------------|-------------------------------------|
| ONE CLEARLAKE CENTRE STE. 201 250 AUSTRIALIAN AVE., SOUTH | | | 250 AUSTRIALIAI | ONE CLEARLAKE CENTRE STE. 201 250 AUSTRIALIAN AVE SOUTH | | | | | | |
| WEST PALM BEACH FL 33401 | | MESI FALM DEA | WEST PALM BEACH FL 33401 | | 3. Date Incorporated or Qualified 08/13/1992 | | 3a. Date of Last Report 08/25/1995 | | | |
| 2. Principal Place of Business c/o Daryl B. Cramer, P.A. | | | 2a. Mailing Address 26 c/o Daryl B. Chamer, P.A. ONE ACLIERRLAKE CENTRE 27 250 Australian Av.So. #201 | | | 4. FEI Number 65-0358483 | | | Applied For Not Applicable | |
| ONE CLEARLAKE CENTRE 250 Australian Av.So.#201 City & State West Palm Beach, FL | | | | | | \$8.75 Additional Fee Required | | | | |
| | | City & State | = 7 : | | | aigh Finariong - aigh than | | • • | May Be | |
| | | | 28 West Palm Beach, FL Zip Country | | | 1 Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s 199.032, | | | ··· | |
| Zip | | Country | k ' | k | USA | Florida Statute | es DYe: | s XNo | tax direct s | 105.000., |
| 33401 | O Name a | 5 USA ind Address of Curre | | 1301 | USA | 10. Name and A | | | d Agent | |
| ONE CLE 250 AUS | TRIALIAN A | ENTRE STE. 201 VE., SOUTH | | | ⁶² ONE C ⁶³ 250 A | B. CRAME LEARLAKE USTRALIAN | CENTRE | | | |
| WEST PA | ILM BEACH | I FL 33401 | | | 84 City | | | F | L 85 Z | ρ Code R 4 ∩ 1 |
| 11 Pursuant to | the provision | ns of Sections 607 050 | 12 and 607 508 Florida | Statutes, the abo | WEST P | PALM_BEACH ration submits this sta | tement for the pi | | | registered offic |
| or registere familiar with | id agent, or b n, arid accept | oth, in the State of Fior the obligations of, Se | n2 and 607, 508, Florida righ. Such change was a flori 607 (1508) Too a S | uthorized by the c tatutes. | corporation's boar | ard of directors. Theret | y accept the ap | pontnient i 19/9/ | as registered | ragent. i am |
| NONATURE | | / | () Ofte | | | | | 1177 | <u> </u> | |
| IGNATURE | signature typed or | printed have of registered a re- | unid title if application | (hOTE Registered | Agent signature require | | | DATE | | 10 IN 19 |
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| IZ. | D | OFFICERS A | ND DIRECTORS DELE | | l Agent signatum respire | | HANGES TO OF | DATE FICERS AN | | |
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oath; that I am an officer or di appears in Block 12 or Block an attachment with an address.

SIGNATURE:

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APRIL 15/96 905-415-8430.