FILE I	NOW: FILING F	EE AFTER	MAY 1ST IS	\$ \$550.00		FIL	ED	
	ROFIT		FLORIDA DEPAR	TMENT OF STATE		Apr 03 199	$0.9 \cdot 0.00$	
	ORATION 6			. Mortham				
ANNUAL REPORT			Secretary of State DIVISION OF CORPORATIONS			Secretary of State		
];	998	See In The	DIVISION OF C				, or state	
DOCUM 1. Corporation N	ENT # V5 8	3064	(9)					
	OWER, INC.							
Principal Place o	V Pucinoss	Maili	ng Address				81013 81841 81811 81841 BABAT 1831	
1975 E. SUNRIS			E. SUNRISE BLVD.					
#616 #616 FT. LAUDERDALE FL 33304 FT. LAUDERDALE FL 33				Λı.		DO NOT WRITE IN TH	HS SPACE	
FI. LAUDEHDALE FE 33304 FI. LAUDEHDALE FE 33304				04		3. Date Incorporated or Qualified		
						08/12/1992		
2. Principal Place	e of Business	2a. M	ailing Address			4. FEI Number 65-0442887	Applied For Not Applicable	
Suite, Apt. #,	etc.	S	uite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		27 C	ity & State			6. Election Campaign Financing	\$5.00 May Be	
23		28				Trust Fund Contribution	Added to Fees	
Zip	Country	29 Z	•	Country 30		This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible	
24	9. Name and Address of			301		10. Name and Address of New Register		
	LL ELAINE	2011	mid	81 Name	Ξla	ine VASQUEZ	,	
1975 E. SUNRISE BLVD. Married 82 Street Address						s (P.O. Box Number is Not Acceptable)	2100#616	
) T LAUDERDALE FL 333	04		83 79	<u>/</u>	E SUNVINCE		
		• .		84 City/_		In a Doedala.	85 Zio Code . /	
44 10	No accidions of Postings	607 0500 and 607	1E09 Clouide Statute	the above comed	/	CHU DERCUELE	e of changing its registered	
office or reg	intered agent, or both, in t	he State of Florida	Such change was a settion 607 0505. Flo	authorized by the corp	poration	ation submits this statement for the purpos 's board of directors. I hereby accept the	appointment as registered	
SIGNATURE	A A M L	ile objections yil, o	saul	3 Statutes Fla	o IN	e VASQUEZ	2/30/98	
Siç	native, typed or printed name of rec	estered agent and little if a	opticable (NOTE	legistered Agent signature	required s	when reinstaling) DAT ADDITIONS/CHANGES TO OFFICERS A		
12.	P	ENS AND DIRECT	DELETE	1.1 TITLE		ADDITIONAL CHARGES TO CITIOENS	Change Addition	
NAME	VASQUEZ, ERWIN M	MD.		1.2 NAME				
STREET ADDRESS	2600 N.E. 9TH ST. FORT LAUDERDALE F	32204		1.3 STREET ADDRESS				
CITY-ST-ZIP TITLE	VP	L 00004	☐ DELE TE	1.4 CITY-ST-ZIP 2.1 TITLE		2 2 2	Change	
NAME	MICELI, ELAINE			2 2 NAME	7	rame only to Elaine VASQ	•	
STREET ADDRESS	820 N.E. 26TH AVENU			2.3 STREET ADDRESS	ļ	Elaino laca	11107	
CITY-ST-ZIP TITLE	FORT LAUDERDALE F	·L 33304	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE	-	CLUMEVASA	Change Addition	
NAME				3.2 NAME				
STREET ADDRESS				3.3 STREET ADDRESS				
CITY-ST-ZIP		***	DELETE	3.4. CITY-ST-ZIP	ļ		Change Addition	
TITLE NAME			- OLLEIL	4.2 NAME			disalgo vicelion	
STREET ADDRESS				4.3 STREET ADDRESS				
CITY-ST-ZIP			Decese.	4.4 CITY - ST - ZIP			Choose Ladding	
TITLE			☐ DELETE	5.1 TITLE 5.2 NAME			Change Addition	
NAME STREET ADDRESS				5.3 STREET ADDRESS				
CITY CT 7ID				5 4 CITY - ST - ZIP	1			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 13 if chapted, or on an attachment with an address.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRÉSS

☐ Change ☐ Addition

DELETE

TITLE

NAME

STREET ADDRESS