| PRO CORPO ANNUAL 19 | RATION | | | Sandra B Secretar DIVISION OF C | RTMENT OF STATE 3. Mortham ry of State CORPORATIONS | | | | |
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| OCUME Corporation Nar | ENT # | V6548 | | (8) | 4890 | | | | |
| | | th florida | | | | | | | |
| ncipal Place of E | Business | | Mailing A | Address | | | A 151 A 011 A1A11 A1A | III Billet Alait | 6 , 0 ,0 6,0 ,0 00 ,0 |
| 4482 S.W. 152 AVE MIRAMAR FL 33027 US | | | | 4485 S.W. 152 AVE MIRAMAR FL 33027 US | | Date Incorporated or Qualified | 3a. Date o | | |
| | | | | | | 09/22/1992 4. FEI Number | 0 | 5/01/19 | 95 oplied For |
| Principal Place | of Business | | 2a. Maili | ng Address | | 65-0360317 | | No | ot Applicable |
| Suite, Apt. #, e | tc. | | Suite | e, Apt. #, etc. | | 5. Certificate of Status Desired | | \$8.75 . Fee Ro | Additional equired |
| City & State | | | 27 City | & State | | 6. Election Campaign Financing Trust Fund Contribution | | • | May Be to Fees |
| Zip | 25 | Country | 28 Zip | | Country 30 | B. This corporation has liability for | s ∐No | | 99.032, |
| | 9. Name and | Address of Current | Registered | I Agent | 81 Name | 10. Name and Address of New | Tiogiora i | | |
| 4485 S.1 MIRAMA | k, William (W. 152 ave R FL 33027 | | | | 83 84 City | dress (P.O. Box Number is Not Accepta | FL | noing its re | Code |
| 4485 S.I MIRAMA 1. Pursuant to or registered familiar with, | N. 152 AVE R FL 33027 the provisions c agent, or both and accept the | of Sections 607.0502 in the State of Floric obligations of, Secti | on 607.0505 | , Florida Statute | 83 84 City tes, the above-named corporation's boses. | oration submits this statement for the p pard of directors. I hereby accept the ap | FL purpose of cha opointment as | nging its re registered | egistered offe agent. I am |
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OFFRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

CR2E034 (12/95)

435-4285