	PROFIT PORATION IAL REPORT 1996	Sar Se DIVISION	EPARTMENT OF STATE  Idra B. Mortham  cretary of State  I OF CORPORATIONS		
1. Corporation	MENT # <b>V721</b> Name  SIDE DEVELOPMENT, IN	08 (6	) 347		
Principal Place of Business Mailing Address					HAT LEIK AKON DION BYAN DIEN AKON DIAN NOBE
6209 GRANT STREET HOLLYWOOD FL 33024		6209 GRANT STREET HOLLYWOOD FL 33024			
US				3. Date Incorporated or Qualified 10/19/1992	3a. Date of Last Report 07/17/1995
2. Principal Pla	ce of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. #	, etc.	26		65-0363907  5. Certificate of Status Desired	Not Applicable  \$8.75 Additional
City & State		27 City & State		Centricate of Status Desired     Blection Campaign Financing	Fee Required
3		28		Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 1	Country 25	Z <sub>ip</sub>	Country 30	8. This corporation has liability for Florida Statutes Yes	
	g. Name and Address of Curr	ent Registered Agent	81 Name	10. Name and Address of New F	Registered Agent
	MI BEACH FL 33180  the provisions of Sections 637.050 diagent, out of the three State of Fic. The obligations of Sections of S	of any Lety 1508, Florida Sta of a Sugri change was Juth Gon 60, 0505, Florida Stati	Resident	ration submits this statement for the pur rulof directors. I hereby accept the app	FL 85 Zip Code rpose of changing its registered office pintment as registered agent. I am - 29 - 9
12.		ND DIRECTORS	(NOTE Fragistered Agent saparete require 13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
TILE NAME STREET ADDRESS	DP SHISLER, THOMAS 4261 W. MCNAB ROAD, #	☐ DELETE	1 1 TILLE 12 NAME 13 STREFT ADDRESS		☐ Change ☐ Addit-on
OTTY - ST - ZIP	POMPANO BEACH FL DT	DELETE	1 4 C(1Y - ST - Z(P) 2 1 T(TLE		Change Addition
IAME TREET ADDRESS	TODD, JOHN A. 6209 GRANT STREET HOLLYWOOD FŁ		2.2 NAME 2.3 STREET ADDRESS		Change Addition
TE CT 710	NOLE WOOD TE	DELETE	2 4 CHY - ST - ZIP 3 1 TITLE		Change Addition
ITLE			3.2 NAME 3.3. STHEET ADDRESS		
itle Ame			3 4 CITY - \$1 - 7/2		
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ITTLE  NAME STREET ADDRESS DITY-ST-ZIP  ITTLE  NAME STREET ADDRESS DITY-ST-ZIP  ITTLE  NAME STREET ADDRESS DITY-ST-ZIP  ITTLE  ITTLE  ITTLE  ITTLE  ITTLE  ITTLE  ITTLE  ITTLE  ITTLE			4.2 NAME 4.3 STHEET ADDRESS 4.4 C TY-SI-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS		Change Addition  Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	certify that the information supplied	DELETE	4 2 NAME 4 3 STHEET ADDRESS 4 4 C TY-SI-ZIP 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CHY-SI-ZIP 6 1 TITLE 6 2 NAME 6 3 STREET ADDRESS 6 4 CHY-SI-ZIP	or the exemption stated in Section 119	. Change Addition