## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Morlham Secretary of State

	1996	COO WE TO		DIVISION	OF COR	UNATI	ONS					
1. Corporation	·	V7272	26	(5	i)							
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2139 UNIVERSITY DRIVE SUITE 435				2139 UNIVERSITY DRIVE SUITE 435								
CORAL SP	RINGS FL 33071		C	CORAL SPRINGS	FL 3307	1		3. Date Incorporated	or Qualified	3a. Dat	e of Last F	legari
								10/16/199			02/09/1	
<ol> <li>Principal Pla</li> </ol>	ce of Business		2a. Ma	ailing Address				4. FEI Number	004			Applied For
Suite, Apt. #	, etc.		<del></del>	iite, Apt. #, etc.				65-0365				Not Applicable
2			27					5. Certificate of Statu	us Desired			Additional Required
City & State			<u> </u>	ty & State				6. Election Campaign	•			<b>0</b> May Be
Ziρ	Co	untry	<b>28</b>		<del></del>	Country	,	Trust Fund Contrib  8. This corporation h				d to Fees
4	25	•	29		30			Florida Statutes		intangible ta	ux under s	199.032,
····	9. Name and A	ddress of Current	t Registere	ed Agent			1	10. Name and Addre	ss of New F	legistered	Agent	
HODTO	ON, ALIDA	•				81	Name					
	JN, ALIDA JNIVERSITY DRIV	Æ				82	Street A	ddress (P.O. Box Number is	Not Acceptab	ole)		
SUITE		· <b>L</b>				83						
		2074										
CORAL	L SPRINGS FL 3	3071				9.4	City					
				<del>.</del>		84	City			FL		o Code
11. Pursuant to	o the provisions of S	Sections 607.0502	and 607.15 a. Such cha	508, Florida Sta ange was autho	tutes, the	250.00		poration submits this statement	ent for the pur		·	
11. Pursuant to or registere familiar with	the provisions of S	Sections 607.0502	and 607.15 a. Such cha on 607.0508	508, Florida Sta ange was autho 5, Florida Statu	tutes, the orized by tes.	250.00		poration submits this stateme oard of directors. I hereby ac	ent for the pur cept the app		·	
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To he leady a dealing that the information supplied with this illing is voluntarily turnished and does not quality for the exemption stated in Section 119.07(3)(k). 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 it 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 changed, or on an attachment with an address.

SIGNATURE:

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/96 954 344 424