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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

F9200000445 (8) **DOCUMENT #**

RARNES	2 ASS0	CLATES	PROFESSIONAL	SERVICES.	INC.
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6300 WILS STE - 700		6	Mailing Address 6300 WILSHIRE BLVD STE - 700									
LOS ANGELES CA 90010 US			LOS ANGELES CA 90048 US				3. Date Incorporated or Qualified 3a. Date of Last Rep 02/14/1995					
2. Principal Î 21	Place of Business	2a. 26	Mailing Address			_		4. FEI Number 95-4400428	J	F	Applied Not App	
Suite, Apv	t. #, etc	and the second second	Suite, Apt. #, etc.	andre i se i sekon i see akkelle de trou			***************************************	5. Certificate of Status Dosired			75 Addition	onal
City & Sta	ate	28	City & State					6. Election Campaign Financing Trust Fund Contribution			.00 May ded to Fee	
Zip	Country	j,	Zip		ountry			8. This corporation has liability for		ax unde	rs 199.03	2,
24	25 9. Name and Address of Cu	29	orad Anoni	30				Florida Statutes Ye 10. Name and Address of New	s XX No	Agent		
;	9. Name and Address or Cu	rrem negisi	erea Agent		81	Nar		10. Name and Address of New	vedistered	Agent		
сто	ORPORATION SYSTEM											
	SOUTH PINE ISLAND ROAD				82	Stre	et Addres	ss (P.O. Box Number is Not Accepta	ble)			
	TATION FL 33324				83							
					84	City				85	Zip Code	
					04	011)			FL	_	Zip Oode	
familiar SIGNATURE	tered agent, or both, in the State of F with, and accept the obligations of, \$ Severe, typical previously of registed OFFICERS	Section 607.0	1505, Florida Statute	os.	ed Ager			Men rainstating: ADDITIONS/CHANGES TO OF	DATE			
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NAME	ROSS, JUDITH A		_	4.2	NAME							
STREET ADDRESS	7402 THICKET TRAIL			43	STREET	ADDRE	ss 252	21 Greenfield Ave.				
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify 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 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 changed, or on an attachment with an address.

SIGNATURE:

Mulith a. Koss Jubith A. Ross 2/13/96 (213) 982-3500

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