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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 125615

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(5)

| NELSON Principal Place 110 E BROADY OVIEDO FL 32 US | e of Business | Mailing Address P.O. BOX 620789 OVIEDO FL 32762-0769 US | at No. of company to the community of th | | | | | |
|---|---|---|--|---|---|----------------------|----------------------|------------------------------|
| U 3 | | 00 | | | 3. Date Incorporated or Qualified | Į. | of Last Rep | ort |
| 2. Principal F | hace of Business | 2a. Mailing Address | | | 12/15/1931 4. FEI Number | 04/16/ | | ed For |
| 21 | | [26] | | 59-0374460 | | | Applicable | |
| Surte, Apt | # , etc | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | | 8.75 Add Fee Requ | | |
| City & Stat | ry | City & State | | | 6. Election Campaign Financing Trust Fund Contribution | | \$5.00 м | ау Ве |
| 2 3 Ζφι | Country | 28 | Count | try | 8. This corporation has liability for intangible tax under s. 199.032, | | | |
| 24 | 25 9. Name and Address of Curre | [29] ent Registered Agent | [30] | | Florida Statutes L 10. Name and Address of New Re | | | |
| ROI | ICE, MIRIAM W. | | 8 | Name | | | | |
| 110 | E. BROADWAY | | 8 | 32 Street Add | dress (P.O. Box Number is Not Acceptal | ole) | | |
| OVI | EDO FL 32765 | | 8 | 33 | | · | | |
| | | | | 34 City | | Ts. | 5 Zip Co | de |
| | | | | 1 ' | | | | |
| agent La SIGNATURE | Signature to proceed many of registive ta | | | | rporation submits this statement for the pation's board of directors. I hereby acception with the patients of | DATE | | |
| Tillet | P | DELFTE | 1.1 111.0 | F T | 7,5517,641,650,161,16 | | | Addition |
| NAME | EVANS, ARTHUR F | | 1 2 NAM | rE] | | | | Maustroni |
| STREET ADDRESS | 146 EAST BROADWAY | | | | | | | Addition |
| City St. Za: | OVIEDO, FL 00000 | | 13 STAL | EFT ADDRESS | | | | Aduaton |
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63 STREET ADDRESS

SIGNATURE:

STREE: ADDRESS

14. I do hereby early that the information supplied with this hing 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 changed, or on an attachment with an address.

FILED

Mar 20 1997 8:00am

Secretary of State

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