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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

ļ.	1990	CO WE THE	DIVISION OF			
DOCUN 1. Corporation		27405	(5)			
. ,	ICK ENTERPRISES	S. INC.				
		.,				
Principal Place	of Business		Mailing Address	<u></u>		
404 CENTRAL			404 CENTRAL AVE.			
P.O. BOX 248			P.O. BOX 248			
CRESCENT C	OTY FL 32112		CRESCENT CITY FL 3	2112	3. Date Incorporated or Qualified	3a. Date of Last Report
					03/14/1977	04/27/1995
2. Principal Pla	ice of Business	1	2a. Mailing Address		4. FEI Number	Applied For
21		2			59-1724893	Not Applicable
Suite, Apt. #	r, etc.	2	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		<u>-</u> -	City & State		6. Election Campaign Financing	\$5.00 May Be
23		2	8		Trust Fund Contribution	Added to Fees
Zip	Country		Zip	Country		or intangible tax under s. 199.032,
4	25 Q. Name and Address	of Current Po		[30]	Florida Statutes Ye 10. Name and Address of New	Begistered Agent
	8. Name and Address	O Current ne	Bistaten Wholit	81 Name	10. Name and Address of New	Trogration regard
BO! DRIC	CK, ROBERT I., SR.			82 Street Ad	ddress (P.O. Box Number is Not Accept	abia)
	WOOD AVENUE			62 Street Ad	daress (F.O. Box Number is Not Accept	മാര്യ
	NT CITY FL 32112			83		
				84 City		85 Zip Code
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11. Pursuant to	o the provisions of Section ed agent, or both, in the St	s 607.0502 and tate of Florida. Si	607,1508, Florida Statut uch change was authoriz	es the above-named corr	poration submits this statement for the poard of directors. I hereby accept the ap	surpose of changing its registered office
or registere	o the provisions of Section ed agent, or both, in the St h, and accept the obligation	tate of Florida. Si	uch change was authoriz	es, the above-named corred by the corporation's b	poration submits this statement for the poard of directors. I hereby accept the ap	surpose of changing its registered office
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SIGNATURE: _

cath; that I am an officer or director of the corporation or the receiver or trustee empty appears in Block 12 or Block 13 if changed for on an attachment with an address.

GNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIV

4/25/96 904-698-1260