FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1997

TITLE

NAME STREET ADDRESS

TITLE NAME

TITLE NAME

CITY - ST - ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Secretary of State

Change

Change

8000022460 P8 -07/24/97--01003--025

***1100.00

Addition

Addition

Addition

Jul 23 1997 8:00am

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(9)

PRANDON LAND OF EARING INC

Principal Place of Business Mailing Address P.O. BOX 1345 BS12 LITHIA PINECREST RD. BRANDON FL 33509 BRANDON FL 33509-1345											
US		US				3.	Date Incorporated or Qualified 05/22/1990		te of Last F 21/1996	Report	
	Place of Business	2a. Mailing Addres	2a. Mailing Address			4.	FEI Number		<u> </u>	oplied For	
21		26	 1						ot Applicable		
Sulte, Apt.	#, etc.	Suite, Apt. #, ε	Suite, Apt. #, etc.			5.	Certificate of Status Desired			Additional equired	
City & Sta	te	City & State	City & State			6.	Election Campaign Financing Trust Fund Contribution			May Be to Fees	
Zip	Country	Zip	Cou	Country			This corporation has liability for i	ntangible :			
24	25	29	30					Yes [
9. Name and Address of Current Registered Agent						10.	Name and Address of New Re	jistered A	gent		
BR.	a SPRING BLOSSOM CT. ANDON FL 33511 to the provisions of Sections 607.03 registered agent, or both, in the Sta	502 and 607.1508, Florida te of Florida Such chano	a Statutes, the al	82 83 84	City	noratio	P.O. Box Number is Not Acceptab	FL Urpose of	changing i	Code ts registered	
agent. Fa	am familiar with, and accept the obt	igations of, Section 607,0	505, Florida Stat	utes).		, ,			J	
	Signature, typed or printed name of registered a			d Age	ni signature require			DATE			
12.		ND DIRECTORS	13.				ADDITIONS/CHANGES TO OFFIC	ERS AND			
TITLE	PVTD	☐ DEŁETE		TLE					Change	Addition	
NAME	ALVAREZ, ROGER 608 SPRING BLOSSOM CT.		1.2 N								
STREET ADORESS	BRANDON FL		1	1.3 STREET ADDRESS							
CITY-ST-ZIP	DS DELETE			1.4 City-St-ZiP					Change	Addition	
TITLE	ALVAREZ, MARILYN		1	21 TITLE 22 NAME					Unange	Modified	
NAME CYDEET ADDRESS	608 SPRINGBLOSSOM CT.				ADDDECC						
STREET ADORESS	BRANDON FL 33511			2 3 STHEET ADDRESS 2 4 CITY-ST-ZIP							
CITY-ST-ZIP	D6			TLE	51 · Z(P			Change	Addition		
NAME	MUDGED PARAGE	ご wみ	3.1 H	-							
STREET ADORESS	LAN SORING BLO	SSOM			ADDRESS						
CITY-ST-ZIP	ANAREZ, RAFAE 608 SPRING BLO Brandon, FI	35511			ST-ZIP						

6.4 CITY - ST - ZIP CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing 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 trystee 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.

4 1 TITLE 4 2 NAME

51 TITLE

61 IIILE

62 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

63 STREET ADDRESS

5.4 CHTY - ST - ZIP

44 CITY - ST - ZIP

DELETE

DELETE

DELETE