CORPO ANNUAL	PROFIT DRATION REPORT	\$61.25 (IF DISSOLVE		FLORI	DA DEPART Sandra B. Secretary SION OF CO	MENT OF Mortham of State	STATE								
OCUME Corporation Na	ENT #	N19456	3		(5)										
		ership assoc	CIAT	ion, inc	<b>C.</b>										
incipal Place of Business			Mailing Address						( tpenner						
1728 N. Main Street Bainesville fl 32609			14110 NW 21ST LN Gainesville FL 32606 US						3. Date Incorporated or Qualified 3a. Date of Last Report 02/27/1987 02/15/1995						
. Principal Place	e of Business	<del></del>	2a.	Mailing Ac	ddress NW 21	LAN		4.	FEI Number NOT	APPLICA	BLE		_	Applied Not App	
Suite, Apt. #, e	etc.	<u></u>		Suite, Apt	#, etc.		<u> </u>	5.	Certificate of	Status Desir	red			5 Additi Require	
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Zip		ountry		Zip		Cou	ntry	8.	This corpora	tion has liab	ility for in	tangible t	ax unde	rs. 199	.032,
ָרָה.	9. Name and A	Address of Current	29 Regis	326 Itered Ager		30	USA 81 Name		Name and	ddress of h					
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	/ILLE FL 3260			47 4E00 E	Sorida Statut	tes the a			SUILLE n submits this		or the pu	FL rpose of c	- b- a-a-sim	Zip Cod 3 2 6 g its reg	ictored
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