

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # P93000034275 (6)

1. Corporation Name
FRANK WALTHER INC.



Principal Place of Business: 5416 DEERBROOKECK CIR. #9 APT. 2201 TAMPA FL 33624 US
Mailing Address: 5416 DEERBROOKE CIR. #9 APT. 2201 TAMPA FL 33624 US

3. Date Incorporated or Qualified: 05/06/1993
3a. Date of Last Report: 05/01/1995

2. Principal Place of Business: 21 5416 DEERBROOKE CREEK CIRCLE #9 APT #9 TAMPA FLORIDA 33624 US
2a. Mailing Address: 27 5416 DEERBROOKE CREEK CIRCLE #9 APT #9 TAMPA FLORIDA 33624 US
4. FEI Number: 48159-3182628
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent: WALTHER, FRANK 5416 DEERBROOKE CIR #9 TAMPA FL 33624
10. Name and Address of New Registered Agent: 81 Name: FRANK WALTHER
82 Street Address (P.O. Box Number is Not Acceptable): 5416 DEERBROOKE CREEK CIRCLE #9
83 City: TAMPA FL 85 Zip Code: 33624

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [Signature] DATE: [Blank]

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: P WALTHER N NAME: WEATHER, FRANK W STREET ADDRESS: 5416 DEERBROOK CIR #9 CITY-ST-ZIP: TAMPA FL	<input checked="" type="checkbox"/> DELETE	1.1 TITLE: PRESIDENT 1.2 NAME: FRANK WALTHER N 1.3 STREET ADDRESS: 5416 DEERBROOKE CREEK CIRCLE #9 1.4 CITY-ST-ZIP: TAMPA FL 33624	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE: V NAME: WATHER, FRANK J STREET ADDRESS: 16005 CHASTAIN RD. CITY-ST-ZIP: ODESSA FL	<input type="checkbox"/> DELETE	2.1 TITLE: [Blank] 2.2 NAME: [Blank] 2.3 STREET ADDRESS: [Blank] 2.4 CITY-ST-ZIP: [Blank]	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: [Blank] NAME: [Blank] STREET ADDRESS: [Blank] CITY-ST-ZIP: [Blank]	<input type="checkbox"/> DELETE	3.1 TITLE: [Blank] 3.2 NAME: [Blank] 3.3 STREET ADDRESS: [Blank] 3.4 CITY-ST-ZIP: [Blank]	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: [Blank] NAME: [Blank] STREET ADDRESS: [Blank] CITY-ST-ZIP: [Blank]	<input type="checkbox"/> DELETE	4.1 TITLE: [Blank] 4.2 NAME: [Blank] 4.3 STREET ADDRESS: [Blank] 4.4 CITY-ST-ZIP: [Blank]	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: [Blank] NAME: [Blank] STREET ADDRESS: [Blank] CITY-ST-ZIP: [Blank]	<input type="checkbox"/> DELETE	5.1 TITLE: [Blank] 5.2 NAME: [Blank] 5.3 STREET ADDRESS: [Blank] 5.4 CITY-ST-ZIP: [Blank]	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: [Blank] NAME: [Blank] STREET ADDRESS: [Blank] CITY-ST-ZIP: [Blank]	<input type="checkbox"/> DELETE	6.1 TITLE: [Blank] 6.2 NAME: [Blank] 6.3 STREET ADDRESS: [Blank] 6.4 CITY-ST-ZIP: [Blank]	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: [Signature] FRANK WALTHER PRESIDENT 4/11/96 813 264 0757

CR2E034 (12/95)