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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000073847 (3)

FILED Mar 13 1997 8:00am Secretary of State

IAMPA																	
Principal Place	e of Rusiness	· · · · · · · · · · · · · · · · · · ·		Mailing Add						-							
505 W NASSAU ST TAMPA FL 33607			;	5505 W NASSAU ST TAMPA FL 33607-1747													
										3.	. Date Incorporated or Qu 10/07/1994	ualified		te of Las 24/1996		t]
2. Principal Place of Business				2a. Mailing Address						4.	. FEI Number				Applied	d For]
21				26							59-3272630					plicable	,]
Sulte, Apt. #, etc.				Suite, Apt. #, etc.						5.	. Certificate of Status Des	ired			5 Addit Require		
City & State				City & State						6.	. Election Campaign Finar	ncing		\$5.0	00 May	Be	7
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24		25	29			30	Υ			<u>ا _</u> _	Florida Statutes		Yes _				4
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	K, SHELBY						"	I Na!!	iC.								Į.
	2 RIVERBO						82	Stree	et Addre	ss (F	P.O. Box Number is Not A	cceptabl	e)				٦
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office or n	egistered age	ent, or both, in the	ne State of Flo	rida. Such c	hange was	es, die a authorize	d by	the o	orporatio	on's t	on submits this statement board of directors. I hereb	y accep	the appo	intment	as regis	stered	
agent. I ad	m familiar wit	h, and accopt II	ne obligations	of, Section 6	607.0505, Fi	orida Sta	tutes	S.									- {
SIGNATURE	Signature typed o	x printed name of reg	istered agent and to	lio il applicabio	TOWN	I Registore	d Ann	ternia tor	ura requiter	n wher	n reinstating)		DATE				ı
12.	Oignatore, typee t		ERS AND DIRE			13.	o rige	D.B. III			ADDITIONS/CHANGES TO	OFFICE		DIRECTO	ORS IN	12	16
TITLE	PVD				DELETE	1.1 T	II E		Т	•				Chang		Addition	- 8
NAME	SISK, SHELBY E			12			1.2 NAME										2
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CITY-ST-ZIP	TAMPA P	L 33637				1		1 - Z(P	Ì								12
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CITY-ST-ZIP	TAMPA F	L 33637				2.40	ITY-S	ST-ZiP									
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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 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.

PRESIDENT.