FILE NOW: FILING FEE AFTER MAY 1 IS \$550.

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT C STATE Sandra B. Morth

Secretary of State

As the second second	NUAL REPORT			Secretary of State			Secretary of State			
	MENT # P94 NRK, CORP.	000076706	(8)				# KONGODE HIN 40/11 OFFICE	ráku áákil áfkil	11 36 186 1 8618 31 411 4 66 41 1	AANA BIN INAI
:										
BUITE 17 ORLANDO FL	ge blossom trail	5487 S. ORAN SUITE 17 ORLANDO FL	ORLANDO FL 32839-2771							
U8	€	US					3. Date Incorporated or 10/14/1994	Qualified	3a. Date of Las 06/14/199	
	lace of Business	2a. Mailing A	ddress				4. FEI Number 59-3274237		1	Applied For
Suite, Apt.	#, etc.	26 Suite, Apt	. #, etc.						¢0.7	Not Applicable 5 Additional
2		27					5. Certificate of Status I	Desired	+	Required
City & Stat	6	City & Sta	le				Election Campaign F Trust Fund Contributi	_		00 May Be
Zip	Country	Zip		Cour	itry		8. This corporation has	liability for	intangible tax unde	
4	25	29 of Current Registered Age		30			Florida Statutes 10. Name and Address		Yes No	
TAD	ABILLO, MARIO	or our failt Hogistered Age	<u> </u>		81 N	lame	IV. Hallie Bild Address	01 11011 110	gistered Agent	
BUT	7 8. ORANGE BLOSSON TE 17 ANDO FL 32837		82 83 84			City	fress (P.O. Box Number is No	л Ассеріат		ip Code
office or i agent. I a SIGNATURE	egistered agent, or both, in m familiar with, and accept Signature, typed or printed name of re						poration submits this statemention's board of directors. The life whome repstating	reby accer	ot the appointment	as registered
12.	OFF10	CERS AND DIRECTORS		13.			ADDITIONS/CHANGE	S TO OFFIC		ORS IN 12
TITLE	VP		DELETE	1.1]:1	ΙĒ				Chang	ge 🔲 Addition
NAME	TARABILLO, MARIO			E.2 NA						
STREET ADDRESS	1719 BOXENEY DR ORLANDO FL			- 6	REET AD	i				
CITY-\$T-ZIP	P		DELETE	2.1 1(1	Y 51-2	<u>"</u>			Chang	ne Addition
NAME	GUTIERREZ, FERNAN	00		2.2 NA						_
STREET ADDRESS	11455 8 ORANGE BLI	dssom trail		23 \$1	ADI	DRESS				
CITY-ST-ZIP	ORLAMOD FL.		DELETE	2 4 0		(IP			T .	F 1 x 1 x x
TITLE NAME		L	DELETE	31111	1				Chang	ge Addition
STREET ADDRESS	÷			3.2 NA 3.3 ST	M Reit adi	DRESS	•			
CITY-ST-ZIP					IV S1-2	1				
TITLE			DELETE	4.1 TIT					☐ Chang	je 🔲 Addition
NAME				4. 2 N/	LME.					
STREET ADDRESS					REET ADI					
CITY-ST-ZIP			DELETE		Y - ST - Z	IP .			☐ Chang	e 🔲 Addition
NAME		L	I OTTALL	5 1 111 5.2 NA			1		FT CHAIR	V LJ HOURION
STREET ADDRESS				ŀ	wit Keel adi	DRESS				
CITY-ST-ZIP					Y-ST- <i>Z</i>					
TITLE			DELETE	6.1 1 1					☐ Chang	ge 🔲 Addition
NAME				6.2 NA	ME					
STREET ADDRESS				6351	REET ADI	DRESS				
CITY-ST-ZIP				64 CB	Y - S1 - Z	œ l				

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 trustee emplowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changer, or on an attackment with an address.

SIGNATURE:

04/29/97 407-818-8550

FILED

May 13 1997 8:00am