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

CORPORATION ANNUAL REPORT

1996



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

101

1. Corporation	MENT# J5913 R INVESTMENTS, INC.	3 (5)								 	
Principal Place of Business Mailing Address											
9236 BENTLEY PARK CIRCLE ORLANDO FL 32819		9236 BENTLEY PARK CIRCLE ORLANDO FL 32819									
							3. Date Incorporated or Qualified 3a. Date of Last Report 02/26/1987 04/17/1995				
2. Principa! Pla	ace of Business	2a. Mailing Address					4. FEI Number 59-2818828		F	Applied Fo	
Suite, Apt. #	ł, etc.	Suite, Apt. #, etc.				·			\$R.	Not Applic 75 Addition	-
22		27					5. Certificate of Status Desired		, -	e Required	
City & State		City & State					6. Election Campaign Financing			.00 May Be	
23 Zip	Country	Zip Country					Trust Fund Contribution			ded to Fees	
2.ip 24	25	29	30	intry	,		8. This corporation has liability for Florida Statutes X Yes	intangible ta \tilde\table No	x under	's 199.032,	
	9. Name and Address of Current		1351	Π-			10. Name and Address of New F		Agent		
				81	Nar	ne					
DUPONT, WILLIAM, III				82	Stre	et Addre	ss (P.O. Box Number is Not Acceptab				
	ENTLEY PARK CR.		83					·			
ORLAN	DO FL 32819										
				84	City	/		FL	85	Zip Code	-
SIGNATURE _	ed agent, or both, in the State of Florid h, and accept the obligations of, Section Stynature, typed or printed name of registers agent a	on 607,0505, Florida Statute	S.				d of directors. Thereby accept the app	DATE	register	ed agent. I a	anı
12.	OFFICERS AND		13.				ADDITIONS/CHANGES TO OFF				
TITLE	DADMOTADT DAMELA C	DELETE	1. 1 TITLE					[Chang	ge 🔲 Addi	ition
NAME	DARMSTADT, PAMELA S. 9236 BENTLEY PARK CR.		1.2 NA		1						
STREET ADDRESS CITY-ST-ZIP	ORLANDO FL				3 STREET ADDRESS 4 City-St-Zip						
TITLE	D) I - ZIF			1	Chang	ge 🔲 Addi	ition
NAME	DUPONT, WILLIAM, III		2.2 NAME			İ		•	_		
STREET ADDRESS	9236 BENTLEY PARK CR.		23\$1			ss					
CITY-ST-ZIP	ORLANDO FL	***	2 4 CI								
TITLE		DELEIE 3 1 T						[Chang	ge 🔲 Addi	ition
NAME			3 2 N								
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NAME					L2 NAME				Chang	,c	
STREET ADDRESS					ADDRE	sş					
CITY-ST-ZIP			4.4 C	ITY-S	31 - ZIP						
TITLE	☐ DELETE 5			1 TITLE				1	Chang	ge 🔲 Addi	ition
NAME			52 N	AME							
STREET ADDRESS					ADDRE	SS					
CITY-ST-ZIP TITLE	- C. C. C.				1 - ZIP		Cnange			n	ltion
NAME		Ljourne						l		je ∐ Add°	(IOI)
STREET ADDRESS					ADDRE	ss					į
CITY - ST - ZIP					ALIUNE 31 ZIP	~					
certify that oath; that I	certify that the information supplied with the information indicated on this annual am an officer or director of the corpor Block 12 or Block 13 if changed, or	al report or supplemental an ation or the receiver or trust	nished and nual report ee empowe	doe:	s not Je and	i accurate	e and that my signature shall have the	same legal	effect a	is if made und	nder

SIGNATURE: Panele S Darmotatt PANELA S. DARMSTADT

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