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Apr 01 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P96000088172 (7)

1. Corporation Name
MARSHA CHESKO, INC.



Principal Place of Business: 11724 FRUBISHER COURT ORLANDO FL 32837
Mailing Address: 11724 FRUBISHER COURT ORLANDO FL 32837-7745

3. Date Incorporated or Qualified: 10/25/1996
3a. Date of Last Report: N/A

2. Principal Place of Business 21
2a. Mailing Address 26

4. FEI Number: 59-3406500
Applied For: Not Applicable

Suite, Apt. #, etc. 22
Suite, Apt. #, etc. 27

5. Certificate of Status Desired:
\$8.75 Additional Fee Required

City & State 23
City & State 28

6. Election Campaign Financing Trust Fund Contribution:
\$5.00 May Be Added to Fees

Zip 24
Country 25
Zip 29
Country 30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134

81 Name: MARSHA A CHESKO
82 Street Address (P.O. Box Number is Not Acceptable): 11724 FRUBISHER COURT
83
84 City: ORLANDO FL 85 Zip Code: 32837

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 607.0506, Florida Statutes.

SIGNATURE: *Marsha A Chesko* President

204-97

Signature typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Table with 5 rows for Officers and Directors. Each row includes fields for Title, Name, Street Address, and City-St-Zip, with a 'DELETE' checkbox.

Table with 4 columns for Additions/Changes to Officers and Directors. Each column includes fields for Title, Name, Street Address, and City-St-Zip, with 'Change' and 'Addition' checkboxes.

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 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: *Marsha A Chesko*

204-97 (407) 858-9864

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)