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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

May 08 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(2)

Principal Place 405 9TH ST. N P O BOX 1216 RUSKIN FL 33	Æ }	Mailing Address 405 9TH ST. NE P O BOX 1218 RUSKIN FL 33570-1218				
					3. Date Incorporated or Qualified 11/24/1964 3a. Date of Last Report 04/26/1996	
2. Principal Place of Business		2a. Mailing Address			4. FEI Number Applied Fo 59-1063634 Not Applie	
Suite, Apt. #, etc		Suite, Apt. #, etc.			SR 75 Additions	
22		27			Fee Required	
City & State 23		City & State	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Z(p)	Country	Zip	Country	,	This corporation has liability for intangible tax under s. 199.032	2.
24	25 29		30		Florida Statutes Yes No	
	9. Name and Address of Curr	ent Registered Agent	81	Name	10. Name and Address of New Registered Agent	
	INCER, WILLIAM H. 9TH ST. NE					
	BX 1218		52	Street Addr	ress (P.O. Box Number is Not Acceptable)	
_	SKIN FL 33570		83			
			84	City	85 Zip Code	
				'	FL ()	
office or n agent 1 a SIGNATURE	egistered agent, or both, in the Sta rn familiar with, and accept the obl	ile of Fiorida. Such change was a igations of, Section 607.0505, Fio	uthorized b rida Statute	the corporat s.	poration submits this statement for the purpose of changing its register tion's board of directors. I hereby accept the appointment as registere	∌d
	Signature typed or printed name of registered a			ent signature requir	red when reinstating) OATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.	PD OFFICERS A	ND DIRECTORS DELETE	13.		Change Add	lition
NAME	SPENCER,W H	_	1,2 NAME	Ì		
STREET ADDRESS	U S HWY 41		1.3 STREET	ADDRESS		j
CITY - ST - ZIP	RUSKIN FL		1.4 CITY-5	T-ZIP		
TITLE		☐ DELETE	2.1 TITLE		[_] Change [_] Add	ition
NAME STREET ADORESS			2.2 NAME 2.3 STREET	ADDOCCO		
CITY-ST-ZIP			2.4 CITY - ST - ZIP			
TITLE		DELETE	3.1 TITLE		☐ Change ☐ Add	ition
NAMÉ			3.2 NAME			
STREET ADDRESS			3.3 STREE	ADORESS		
CHY-SI-ZIP		☐ DELETE	3.4. CITY-	ST-ZIP	Change Ado	Ution
TITLE NAME		☐ nereie	4 1 TITLE - 4. 2 NAME	ĺ	Citalibe CT Wit	IILIOII
STREET ADDRESS				ADDRESS		
CHY-ST-ZIP			4.4 CITY-5			
TITLE		☐ D€LETE	5.1 TITLE		☐ Change ☐ Ado	lition
NAME	18		5.2 NAME	į		
STREET ADDRESS			5.3 STREE	ADDRESS		
CHTY - ST - ZIP	·	□ DELETE	5.4 CITY - 5	ST-ZIP	Change Ado	lition
TIFLE	E	☐ nerese	61 TITLE 62 NAME		Change Auc	ng y ii
NAME STREET ADDRESS	i.			ADDRESS		
CHY-ST-ZIP			6.4 CITY - 1	l l		
14. I do heret informatio	on indicated on this annual report o	r supplemental annual report is tr	y for the exe ue and acc ered to exec iress.	emption stated urate and that cute this repor	d in Section 119.07(3)(i), Florida Statutes. I further certify that the timy signature shall have the same legal effect as if made under oathort as required by Chapter 607, Florida Statutes; and that my name	that

SIGNATURE:

William H. Speccer 5-1-97