FILE NOW: FILING FEE PROFIT CORPORATION ANNUAL REPORT 1996			FLORIDA DEPARTMENT Sandra B. Morih Secretary of Sta DIVISION OF CORPOR		OF STATE Im e						
1. Corporation		327280 Iments, inc.	(4)								
Principal Place			ling Address					AANI AIAIN RIEII		ILAIA MIMIKAMAN	
140 FOX TR/ SEBRING FL US		S	40 FOX TRAIL EBRING FL 33870-65 IS	516			3. Data Incorrorated or Qualified	3a. Date o	f pet Ror	vort	—ı
							3. Date Incorporated or Qualified 03/08/1968	04	17/199	5	
2. Principal Pla	ace of Business	2a. 25	Mailing Address				4. FEI Number 59-1205171			pplied For ot Applicable	-
Suite, Apt. 1	#, etc		Súite, Apt. #, etc.	. <u>.</u>			5. Certificate of Status Desired	[]	\$8.75	Additional equired	
City & State)	······································	City & State				6. Election Campaign Financing Trust Fund Contribution	[]	\$5.00	May Be to Fees	
Zip	Count 25		Zip	Col 30	intry		 8. This corporation has liability for a Florida Statutes K Yes 				_
24		ess of Current Registe	ered Agent	[30]	81 Name		10. Name and Address of New R		jent		
104 14T SEBRIN	r, RICHARD TH ST. SOUTH G FL 33870	ions 607.0502 and 607	1508, Florida Statut	les, the abc	83 84 City	Corporal	ss (P.O. Box Number is Not Acceptab	FL pose of chan	nino its re	Code gistered offic	
familiar wit SIGNATURE	th, and accept the oblig	ations of Section 607.0	505, Florida Statutes	S.	Agent signature		of directors. I hereby accept the approximation of the renstange	DATE	ugistered a		- 0
12. THE		OFFICERS AND DIFIECT	ORS	13 .			ADDITIONS/CHANGES TO OFF		IRECTOP Change	IS IN 12	(12/95)
NAME STREET ADDRESS	GILLETT, RICHAI 104 14TH ST. SI SEBRING FL			1.2 N				Ļ	enunge		2E034 (1
CITY - ST - ZIP THTLE	SEDAING FL		DEL ETE	1.4 C 2.1 T	ITY-ST-ZIP ITLE				Change	Addition	
NAME STHEET ADDRESS	GILLETT, MARY 104 14TH ST. SI SEBRING FL				TREET ADDRESS			•	-		
CITY-ST-ZIP TITLE	- v		DELETE	240	ITY-ST-ZIP ITLE		- <u>·····</u> , ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,		Change	Addition	
NAME STREET ADDRESS	GILLETT, DAVID 102 14TH ST., S SEBRING FL				TREET ADDRES	5					
CHTY-ST-ZIP THTUE			DELETE	4.11	ITY-ST-ZIP ITLE			·	Change	Addition	-
NAME STREET ADDRESS					TREET ADDRESS	;					
CITY-ST-ZIP TITLE	 		DEL ETE	4.4 C 5. 1 1	ITY-ST-ZIP ITLE	+			Change	Addition	
NAME				5.2 N							
STHEFT ADDRESS CITY-ST-ZIP					treet address ity-st-zip					<u></u>	
TITLE NAME			DELETE	6 1 1 6.2 N					Change	Addition	
NAME STREET ADDRESS					ame Treet address	;					
CITY-ST-ZIP 14. Lido berebi	certify that the inform:	ation supplied with this f	ling is voluntarily fur		ITY-ST-ZIP does not cu	Jalify for	the exemption stated in Section 119.	07(3)(k) Florid	la Statuto	s further	-
certify that oalh; that	t the information indicati I am an officer or direct	ed on this annual report	or supplemental ann the receiver or truste	nual report se empowe	is true and a	accurate	e and that my signature shall have the report as required by Chapter 607, Fk	same legal ef	lect as if r	nade under	
SIGNAT	URE:	In THE			R.Gil	1/eT/	- 4- <u>12-96</u>	941-6	55-1	1506	