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PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

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Jan 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 383777

(0)

TED CARTER ENTERPRISES, INC.

Principal Place of Business		Mailing Address				0 100190 11101 10100 (1111 1001) 1600; 1061 01011 01011 01011 01011 01011 01011 01011 01011			
300 CENTRAL AVE. KEY LARGO FL 33037 US		P. O. BOX 345 Tavernier FL 33070-0345 US							
		**				3. Date Incorporated or Qualified 06/09/1971		ate of Last F 25/1996	Report
2. Principal P	lace of Business	2a, Mailing Address	2a, Mailing Address			4. FEI Number		A	pplied For
21		26			59-1353599 Not Applicable			ot Applicable	
Suite, Apt	#, etc.	Suito, Apl. #, etc.			5. Certificate of Status Desired			Additional	
22 City 8 State		[27]						equired	
City & State		City & State			6. Election Campaign Financing			May Be	
23				untry		Trust Fund Contribution	<u> </u>		to Fees
Zip	Country	Zip	h	unity		8. This corporation has liability for i			i. 199.032,
24	9. Name and Address of Curren	29	30			Florida Statutes 10. Name and Address of New Reg		_ No	
CAD	Carrait and Company and the Company and the Company of the Company	Name	IV. Hallo and Address of Hear He	Jiatorou	Maile				
CARTER, JOHN E. P.O. BOX 345									
TAVERNIER FL 33070				82	Street Add	ress (P.O. Box Number is Not Acceptab	le)		
IVA	ENNIEN FL 33070			83					
				84	City		FL	85 Zip	Code
office or r	to the provisions of Sections 607 050 egistered agent, or both, in the State in familiar with, and accept the obligi	of Florida, Such change w	as authorize	ed by	the corpora	poration submits this statement for the p tion's board of directors. I hereby accep	urpose o	f changing i pointment as	ts registered registered
SIGNATURE	Signator Type Complete Came of registered ago					ired when reinstating)	DATE	·····	
12.	OFFICERS AN		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTO	3S IN 12
Tifle	PO DELETE		1,1 1	1.1 TITLE				Change	Addition
NAME	CARTER, JOHN E.		1.2 N	NAME					
STREET ADDRESS	96130 OVERSEAS HIGHWAY			1.3 STREET ADDRESS					į
CHTY - ST - 7IP	KEY LARGO FL			1.4 CITY - ST - ZIP					
TificE			2.1 TITLE					Change	Addition
NAME			221	2 2 NAME					
STHEET ADDRESS			235	2 3 STREET ADDRESS					
CITY - ST - 7 P			2.40	2. 4 CITY - ST- ZIP					
TITLE		☐ DELETE	3.1 1	ITLE				Change	Addition
NAME			3.2 N	NAME					
STREET ADDRESS			3.3 \$	STREET	ADDRESS				
CITY-ST-ZIP		,,,,	3.4. (CITY - S	1- ZIP				
THLE		DELETE	4.1 T	TILE				Change	Addition
NAME			4.21	NAME					
STREET ADDRESS			4.3 9	STREET	ADDRESS				
CI*Y-S1-7:P			4.4 0	CITY S	1 - ZIP				
TITLE			5.1 T	5.1 TITLE				Change	Addition
NAME			5.2 N	AME	1				
STREET ADDRESS			5.3 8	TREET	ADDRESS				
CITY-ST-7P				CITY·S	1				
TITLE		DELETE	6.1 T					☐ Change	Addition
NAME			6.2 N	IAME					
STREET ADDRESS					ADDRESS				
CITY-ST-7/P				JITY - S	1				

14. I do hereby certify that the information supplied will this filling 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 Chapter 607, or on an infinite internal with an address