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PROFIT CORPORATION ANNUAL REPORT

1997



Sandra B. Mortham 🗸 Secretary of State

DIVISION OF CORPORATIONS

FILED May 16 1997 8:00am Secretary of State

| DOCUMENT 1. Corporation Name | # | 400670 |
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| AKEPIRA, INC. Principal Place of Business Mailing Address | | | | | | | | |
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| 4836 BUTLER S | | P.O. BOX 658 | | | | | | |
| ASTOR FL 32102 ASTOR FL 32102-0658 | | | 3 , [| ate Incorporated or Qualifie | ed 3a. Dat | te of Last Re | eport | |
| | Ana | | | 0 | 5/02/1972 | 08/2 | 9/1996 | |
| 2. Principal Pia | ce of Business | 2a, Mailing Address | | " | El Number | | | plied For |
| ll parties and the | | Suite, Apt. #, etc. | | ···· | <u>59-1430181</u> | | | t Applicable |
| Suite, Apt. # | CIC | 30ite, Apt. #, etc. | | 5. C | Certificate of Status Desired | | \$8.75 A | |
| City & State | | City & State | | 6. F | tection Campaign Financing | | \$5.00 | May Re |
| | | 28 | | I | rust Fund Contribution | | Added t | |
| Zip | Country | Zip | Country | | his corporation has liability t | | | 199.032, |
| | 25 9. Name and Address of Curre | 29 | 30 | ···· | lorida Statutes lame and Address of New | Yes X | | |
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| | ert, brett l Orth bay street | | | | | | | |
| | S FL 32726 | | 82 Str | eet Address (P.C | D. Box Number is Not Accep | otable) | | |
| EUSII | 3 FL 32120 | | 83 | | | | | |
| | | | | | | | 15.5 | |
| | | | 64 Cit | y | | FL | 85 Zip (| Dode |
| 1. Pursuant to | the previsions of Sections 607.050 stored agent, or both, in the State | 02 and 607.1508, Florida Stat e of Florida. Such change wa: | s authorized by the | corporation's bo | and of directors. I hereby ac | cent the appo | as fremtric | registered |
| office or reg agent I am IGNATURE | pistored agent for both, in the State familiar with, and accept the oblig pout re, typed or printed name of registered ag | e of Florida Such change wat gations of Section 607.0505, i contand the if applicable (N | s authorized by the Florida Statutes. OTE: Registered Agent sign | corporation's bo | and of directors. I hereby ac | DATE | ointment as | registered |
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