FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

409746 DOCUMENT #

(5)

1. Corporation Na JOHNS		` ,					
Principal Place of Business		Mailing Address				B16 6491 618,	is BiBit Bibit Bibit Bibit Bibit Arbit 1681
1820 N. NOVA ROAD P. O. BOX 827 HOLLY HILL FL 32117		1820 N. NOVA ROAD P. O. BOX 827 HOLLY HILL FL 32117					
					3. Date incorporated or Qualified	3a. Da	te of Last Report 05/01/1995
					09/29/1972 4. FEI Number	<u></u>	Applied For
2. Principal Place of Business		2a. Mailing Address		59-1419305		Not Applicable	
21 Suite, Apt. #. €		26		5. Certificate of Status Desired		\$8.75 Additional	
Suite, Apr. W. Glo.		27				Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
3		28			This corporation has liability for intangible tax under s. 199.032,		
Zip Country		29 30			Florida Statutes Yes No		
24	9. Name and Address of Curre			r	10. Name and Address of New I	Registere	d Agent
	<u></u>		81				
SOLOM	SOLOMON, STANLEY J.			Street Add	Address (P.O. Box Number is Not Acceptable)		
433 SILVERBEACH AVE.			83	ļ			
SUITE 1	101		84 City		rpora ion submits this statement for the purpose of changing its registered office board of directors. Thereby accept the appointment as registered agent. I am		
	NA BEACH FL 32118						
	gnative its paid in centerhologie of the property of		NOTE Frysle at Age		oration submits this statement for the pure of directors. Thereby accept the application of the pure statement for the pure and of the pure statement for the pure and of the pure statement for the pure stat	DATE	ND DIRECTORS IN 12
TITLE	PSD DOLETE JOHNSON, THOMAS E.		1, 1 11116				Change Addition
NAME			1.2 NAME				
STREET ADDRESS	104 Springwood Dr.		1.3 STREET ADDRESS				
CITY-ST-ZIP	DAYTONA BEACH FL		1.4 CITY-				Change Addition
TITLE	VP	☐ DELETE	2 7 NAME				
NAME	JOHNSON, JOHNNY B 後途泣道首次野境 模祭 東 道特		L	EL ADDRESS	104 PINE CONE COURT		
STREET ADDRESS	**************************************		24 C+TY		DAYTONA BEACH, FL 32119		
CITY-ST-ZIP TITLE	XXXXXXXXXXXXXXXX	DELETE	3 1 Tutu				Change Addition
NAME			3.2 NAM	£			
STREET ADDRESS				FT ADDRESS			
CITY - ST - ZIP		ET 05.51	3 4 Ci ¹ Y				☐ Change ☐ Addition
TITLE		☐ DEFER	DELETE				_
NAME				ET ADDRESS			
STREET ADDRESS				-ST-ZIP			
CITY-SI-ZIP TITLE		DELF IE					Change Addition
NAME			5.2 NAM	16			
STREET ADDRESS				EET ADDRESS			
CITY - ST - ZIP		Em bereit		r-ST-ZIF			Change Addition
TITLE		☐ DEFEI€	6 1 TIT 62 NAM				-
NAME				EET ADDRESS			

64 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this firing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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 certify 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 CITY - ST - ZiP

SIGNATURE:

STREET ADDRESS

Thomas E. Johnson SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(904)672-7511