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CORPORATION ANNUAL REPORT



Sandra B. Mortnami

Secretary of State

DIVISION OF CORPORATIONS

1996

411857

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Principal Place of Business		Mailing Address				
112 GRACE AV	/E	112 GRACE AVE				
P.O. BOX 1101		P.O. BOX 1101 COCOA FL 32923		3. Date Incorporated or Qualified	3a. Date of La	ast Report
COCOA FL 329	<del>32</del> 3	0000112 11111		10/30/1972		1/1995
		2a. Mailing Address		4. FET Number		Applied For
Principal Place	of Business	26		59-1421211		Not Applicable
Suite, Apt. #.	etc.	Suite Apt. #, etc.		5. Certificate of Status Desired		3.75 Additional Fee Required
24,		27		6. Election Campaign Financing	S	5.00 May Be
City & State	***************************************	City & State		Trust Fund Contribution		Added to Fees
	Country	28 Zip	Country	8. This corporation has liability for	intangible tax und	ders 199.032,
Zφ	<b>25</b>	29	30	Florida Statutes Yes  10. Name and Address of New F	No No	nt .
	9. Name and Address of Cure	rent Registered Agent	Od Nove	10. Name and Address of New P	negistered Ago.	
			81 Name		<u> </u>	
FERGUS	ON, JAN S.		82 Street Addr	ress (P.O. Box Number is Not Acceptat	:DIE)	
112 GRA			83			
COCOA	FL 32922				8	5 Zip Code
			84 City	iration submits this statement for the po and of directors. I hereby accept the app	FL I	
ngaramiotal 🔏.	Ma	TV	the Salatoned Age of segration from	e Lysher reast days	DATE	TOTODO IN 12
2.	agnature. I predict prodest nation at registered to OF FICERS	AND DIRECTORS	13.	el wher fell र रेगड़ां ADDITIONS/CHANGES TO OF	FICERS AND DIF	RECTORS IN 12 Change Addition
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14. I do hereby certify that the information supplied with this amount of the corporation of the same legal effect as if made under certify that the information indicated on this annual report or supplied 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 supplied to execute this report as required by Chapter 607, Florida Statutes; and that my name 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 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 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 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 oath, that I am an officer or director of the corporation or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name oath, that I am an officer or director of the corporation or the receiver of the corporation of the corporation or the receiver of the corporation of the corporation