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PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 10 1997 8:00am

Secretary of State

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3-5-97 352-132-8944

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 460468

(2)

SAVAGE, KRIM & SIMONS, P.A.

Principal Place of Business Mailing Address							81W71 WIW11 WIW11 U	JIO11 OFO11 1	THE PERSON	
121 N.W. 3RD	121 N.W. 3RD ST.									
OCALA FL 344	75	OCALA FL 34475-6840 US	OCALA FL 34475-6640							
US		03			٠	3. Date Incorporated or Qualified	3a. Date o		eport	
						08/30/1974	04/22/1996			
	ace of Business	2a. Mailing Address				4. FEI Number 59-1557783	Applied For			
Suite. Apt. #. etc.		Suite Ant # etc	Suite, Apt. #, etc.			09 1007700	Not Applicable \$8.75 Additional			
22]		······································	27			5. Certificate of Status Desired		Fee Re	1	
City & State		City & State				6. Election Campaign Financing	\$5.00 May Be			
23		28	28			Trust Fund Contribution		Added t	-	
Zφ	Country	Zip Coi				8. This corporation has liability for intangible tax under s. 199.032,				
24	25 29 34 475 6695 30 9. Name and Address of Current Registered Agent					Florida Statutes Yes X No				
		irrent Registered Agent		B1	Name	10, Name and Address of New Re	Jistered Age	nt		
	ONS, GARY C.		Ľ		INDITIO					
	n.w. 3rd st. Na fl		82 Street Add			fress (P.O. Box Number is Not Acceptable)				
OUR	NDA LE		<u> </u>	63				*****		
				64	City		FL °	15 Zip (Code	
11. Pursuant l	to the provisions of Sections 607	0502 and 607.1508, Florida Statute	s, the ab	ove	named o	orporation submits this statement for the p	urpose of cha	anging it	s registered	
office or ri agent. Lai	egistered agent, or both, in the S m familiar with, and accept the c	State of Florida. Such change was au obligations of, Section 607.0505, Flor	uthorized rida Statu	ıtes.	the corpo	oration's board of directors. I hereby accept	it the appoint	ment as	registered	
SIGNATURE										
	Signature typical or printed name of registers			Ageri	it signature re	quired when reinstating)	DATE			
12.	OFFICERS STD	S AND DIRECTORS DELETE	13.			ADDITIONS/CHANGES TO OFFIC		RECTOR Change	Addition	
THE	SIMONS, GARY C.	Otten	1.1 TITI 1.2 NAI				<u></u>	Change	L.J AUGILION	
NAME STREEL ADDRESS	121 NW 3RD ST				ADDRESS					
City - ST - 7IP	OCALA, FL 00000		1.4 CIT							
THE	PD	DELETE	2.1 7170					Change	Addition	
NAME:	KRIM, FRED J		2.2 NA	ME						
STREET ADDRESS	121 NW 3RD ST		2.3 STF	REETA	ADDRESS	n				
City - S1 - 7IP	OCALA, FL 00000		2. 4 CI	TY-ST	T-ZIP					
THLE		DELETE	3.1 TIT	LE				Change	Addition	
NAME			3.2 NA	ME						
STREET ADDRESS			3.3 STF	REETA	ADORESS					
Crity S1-7IP	And the state of the stat	Dougte	3.4 CIT		T-ZIP			Change	☐ Addition	
TITLE		[] DELETE	4.1 TIT				LI	orianiye	L Addison	
NAME PERCELAGRACIA			i		ADDRESS					
STREET ADDRESS O(TY+ST-7IP)			4.4 CIT							
TITLE		DELETE	5.1 TiT		- 211			Change	Addition	
NAME			5.2 NA				,—	=		
STREET ADDRESS			5.3 STF	REET A	ADDRESS					
City-St-ZiP			5.4 CIT	Y-ST	- ZIP			-		
TitlE		DELETE	6.1 TIT	LE				Change	Addition	
N4ME			6.2 NA	ME						
STREET ADDRESS			6.3 STF	REET A	ADDRESS					
CHY+ST-70P		P. State C. P.	5.4 CIT				. (4.000	art at .	at -	
intermatio	n indicated on this annual repor	t or supplemental annual report is tru	ue and a	CCUI	rate and t	ited in Section 119.07(3)(i), Florida Statute hat my signature shall have the same lega	al effect as if r	made und	der oath; that j	
lam an o	fficer or director of the corporation	on or the receiver or trustee empowe ed, or on an attachment with an addi	ered to ex	xecu	ute this re	port as required by Chapter 607, Florida S	tatutes; and I	that my r	ıame	
2,2,20,000										

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR