## 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

SIGNATURE;

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OCUM Corporation N ELIAS		36 (3)				
nicipal Place of Business 4120 PINE ISLAND RD., N.W. P.O.BOX 720 MATLACHA FL 33909		P.O.BOX 720	4120 PINE ISLAND RD., N.W.			
				<ol> <li>Date Incorporated or Qualified</li> <li>11/01/1975</li> </ol>	3a. Date of Last Report 07/25/1995	
Principa: Plac	e of Business	2a. Mailing Address		4. FEI Number 59-1625135	Applied For Not Applicable	
Suite Apt #,	etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
	Country	28	Country	1	Added to Fees of intangible tax under s 199.032, as No	
	25   9. Name and Address of Curre	29 Pent Registered Agent	30	Florida Statutes Ye		
MCEWAN, CHRIS G. 5400 PINE ISLAND RD. BOKEELIA FL 33922			81 Name		Tioglotolou Higolii	
			82 Street	t Address (P.O. Box Number is Not Accepta	able)	
			83			
			84 City		FL 85 Zip Code	
GNATURE s	PD DIA, ELIAS LUIS D	nd section Lagricule (MC) NO DERECTORS DELETE	13. 1.1 TITLE 1.2 NAME		DATE FICERS AND DIRECTORS IN 12 Change Addition	
GELADORESS	PINE ISLAND ROAD MATLACHA FL		1.3 STREET ADDRESS 1.4 City - St - 2IP			
Y SI ZIP LE Mi	S DIA, ELIAS PINE ISLAND ROAD	DETEJE	2 1 TIFLE 2 2 NAME		Change Addition	
EFFAOLRESS Y-ST-ZIP	MATLACHA FL		2.3 STREET ADDRESS 2.4 City-ST-ZIP			
F Vî	DIA, ELIAS PINE ISLAND ROAD	☐ DELETE	3 1 TITLE 3 2 NAME		☐ Change ☐ Addition	
EFT ADDRESS 7-St-Zif	MATLACHA FL		3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	8		
		[] DELETE	4. 1 TITLE 4.2 NAME		☐ Change ☐ Addition	
EET ADDRESS 7-ST-ZIP			4.3 STREET ADORESS 4.4 City - St - Zip			
F J <sub>1</sub>		[] DELETE	5 1 TITLE 5 2 NAME		☐ Change ☐ Addition	
-1 LADDEESS F-SE-ZIF			5 3 STREET ADDRESS 5 4 City-St-Zip			
1311211		C DELETE	6 1 TITLE 6 2 NAME		Change Addition	
EFF AUCHESS ST-200			6 3 STREET ADDRESS 6 4 CITY-ST-ZIP			
<ul> <li>certify that ti</li> </ul>	he information indicated on this an	nual report or supplemental ann	ual report is true and a	ualify for the exemption stated in Section 11 accurate and that my signature shall have that this report as required by Chapter 607,	ne same legal effect as if made under	

AME OF SIGNING OFFICER OR DIRECTOR

2/4/46 (99) 253-1668 Daylor & Prone !