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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT #

1. Corporation Name

516397

(7)

| A-A | AK | RFF. | . INC |
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SIGNATURE:

| rincipal Place | of Business | Mailing Address | | | 1 183761 61101 11016 81100 11117 16111 1001 | I BUBUL BUBUL BUBUL BUBUL BUBUL KAN |
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| 2286 W BEAT PO BOX 179 | | 2286 W BEAVER ST PO BOX 1795 JACKSONVILLE FL 3 | 12204 £70E | | | |
| DAONOOHIIE | ce re veed from | UNORDONAILE LE S | 12201-1730 | | 3. Date incorporated or Qualified 3. 10/14/1976 | a. Date of Last Report 02/23/1995 |
| | ace of Business | 2a. Mailing Address | | | 4. FEI Number | Applied For |
| Suite, Apt. (| # etc | Suite, Apt. #, etc. | | | 59-1839042 | Not Applicate \$8.75 Additional |
| | | 27 | | | 5. Certificate of Status Desired | Fee Required |
| City & State | , | City & State | | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| Zio | Country | Zip | Count | ry | 8. This corporation has liability for intar | |
| | 25 | 29 | 30 | | Florida Statutes Yes | <u> </u> |
| | 9. Name and Address of Curren | t Registered Agent | | 1 Name | 10. Name and Address of New Regis | stered Agent |
| ANDEDO | AN IPAUE | | · · · · · · · · · · · · · · · · · · · | 1 Name | | |
| ANDERSON, LESLIE 2286 W BEAVER ST | | | 8 | 2 Street Add | ress (P.O. Box Number is Not Acceptable) | |
| | NVILLE FL 32209 | | 8 | 3 | | |
| | | | 8 | 4 City | | 85 Zip Code |
| L. Pine iont t | a the reductions of Sections 600 0503 | and 60 2150 Florida State | tos the else | Lange Learne | realism submitte this atalasment for the surroun | FL B Zip Cook |
| or register | ed agent, or both, in the State of Floric | la sugni change was author | ized by the co | rporation's boa | ration submits this statement for the purpos ird of directors. I hereby accept the appointr | nent as registered agent. I an |
| familiar wit | n, and a cept the obligations of, Sect | 0 007.0595, Florida Statute | 9S. | | | 1-26-96 |
| GNATURE / | Squature: Issued on trainest pariet of registered agent. | and the Labolitation (1) | NOTE: Boustered A | gent signarure require | ed where reinstational | DATE |
| (| OFFICERS ANI | | 13. | , | ADDITIONS/CHANGES TO OFFICER | RS AND DIRECTORS IN 12 |
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NING OFFICER OR DIRECTOR

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