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

PROFIT

SIGNATURE:

STANATURE AND TYPED OR RESITED NAME OF SIGNING PRICER OF DIRECTOR



FLORIDA DEPARTMENT OF STATE

ANNUA	CORPORATION ANNUAL REPORT 1996			Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS							
DOCUM	ENT #	552281		(8)							
		eau Jr., D.D.S	S., P.	Α.							
Principal Place of Business Mailing Address							i idala: dirkt arine tibie pari		110 110 41 1101 110 110	. Bilbin Aibin (Ab.	
516 N MACARTHUR AVE PANAMA CITY FL 32401			516 N MACARTHUR AVE PANAMA CITY FL 32401								
							3. Date Incorporated or Qualifie 12/01/1977	d 3a. D	oate of Last Rep 04/13/19		
2. Principal Place	of Business		2a. N	Mailing Address			4. FEI Number 59-1782901			pplied For ot Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired		S8.75 Additional Fee Required		
City & State				Orty & State			Election Campaign Financing Trust Fund Contribution			May Be to Fees	
Zip	Cou	ntry		?ір	Cou	ntry	This corporation has liability Florida Statutes	for intangibl		199.032,	
4	25	dress of Current R	29 egiste	red Agent	[30]		10. Name and Address of Ne				
PANAMA 11. Pursuant to		ections 607.0502 ar		.1508, Florida Statute change was authoriz 505, Florida Statutes		84 City ve-named corporation's b	poration submits this statement for the poard of directors. I hereby accept the	numnee of	changing its re	Code egistered office agent. I am	
SIGNATURE		ame of registerest agent are				Agent signal, raineq	arad ydrau (Berstafrig)	DA			
12.		OFFICERS AND [rors	13.		ADDITIONS/CHANGES TO	OFFICERS.	AND DIRECTO	RS IN 12	
TITLE	PD			DELETE	1.13				L Ollango		
NAME		GEORGE J. JR			1.2 N	TREET ADDRESS					
STREET ADDRESS	516 N MACA PANAMA CIT					ITY-ST-ZiP					
CITY-ST-ZIP TITLE	ST	1115		DELETE	2 1 1				Change	Addition	
NAME	WALTER, ME				22 N	AME TREET ADORESS					
STREET ADDRESS	PANAMA CI	ARTHUR AVE.				aTY-S1-Zif					
CiTY+ST-ZIP TITLE	PANAMA UI	<u> </u>		☐ DELFTE	3.1				Change	Add-tion	
NAME					321	IAME					
STREET ADDRESS					3 3	STREET ADDRESS					
CITY-ST-ZIP		.				DITY+ST-ZIP			Change	Addition	
TITLE				☐ DELFTE	1	TITLE FAME				_	
NAME .						STREET ADDRESS					
STREET ADORESS CITY+ST-ZIP					4.4	DITY - ST - ZIP					
11 ⁷ LE			•	☐ DELETE	5 1	TITLE			Change	Addition Addition	
NAME						NAME					
STREET ADDRESS						STREET ADOPESS					
CITY - S1 - ZIP				DELETE		CITY - ST - ZIP TITLE	J		Change	Addition	
TITLE				been		NAME					
NAME capeer annesses						STREET ADDRESS					
STREET ADDRESS CHY-ST-ZIP					6.4	ן כייקוב ואינור				A-a E -ab	
4.4 Lalo boroby	y certify that the info the information ind	ormation supplied w licated on this annua	ith this	filing is voluntarily ful rt or supplemental an	nished an nual repo	dose not out	lify for the exemption stated in Section cura'e and that my signature shall hav e this report as required by Chapter 6	i 119.07(3)(l e the same 37. Florida 9	κ), Florida Statu legal effect as Statutes: and th	ites, i iurther if made under nat my name	

36-96 (904) 763.5817