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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name 570617

(1)

RICHARD E. WILES CORPORATI	ON					
Principal Place of Business	Mailing Address			1841 BIBH BIBH BU	411 #1811 <b>4</b> 11	
4110 HIGHLAND PARK CIRCLE	4110 HIGHLAND PARK	CIRCLE				
LUTZ FL 33549	LUTZ FL 33549					
US	US		3. Date Incorporated or Qualified 3a. Date of Last Repor			
			04/28/1978	08/1	0/1995	
2. Principal Place of Business	2a. Mailing Address	1.1	4. FEI Number			oplied For ot Applicable
21 18718 Wimbledon Circle	26 18718 Wimb Suite, Apt #, etc.	ledon Circle	59-1829344			Additional
Suite, Apt. #, etc.	27 Stine, Apr. #, etc.		5. Certificate of Status Desired		<b></b>	equired
City & State	City & State		6. Election Campaign Financing		\$5.00	May Be
23 Lutz, Florida	28 Lutz, Flor	ida	Trust Fund Contribution			to Fees
Zip Country	Zıçı	Country	8. This corporation has liability for		unders 1	99.032,
24 33549 25 Hillsboro	ugh <sup>29</sup> 33549	30Hillsborough	l	<b>8)</b> (Vo		
9. Name and Address of Curr	rent Registered Agent		10. Name and Address of New F	legistered Ag	jent	
		81 Name				
WILES, RICHARD E.		82 Street Addr	ress (P.O. Box Number is Not Acceptat	ole)		
2901 W BUSCH BLVD STE 703		83	Wimbledon Circle			
TAMPA FL 33618		63				
		84 City		FL		Code
11. Pursuant to the provisions of Sections 607.05	00 4 602 4505 Florida Statut	Lutz	ration submite this statement for the nu	ranse of chanc	pina its re	3549 aistered office
	302 and 607 Java, Honda atawi	ies, the above harried corp of	ed of disactors. I haraby accept the son	ointment as re	gistered a	agent. Lam
or registered agest, or both, in the State of Ele	kw.da. Suich channe was aufnonz	zed by the corporation's boar	rd of directors, i no-coy accept the app		-	
<ol> <li>Pursuant to the provisions of Sections 607.03 or registered agent, or both, in the State of Elefamiliar with and accept the obligations of Sections.</li> </ol>	krista, Such change was authoriz ection 607.0505, Florida Statutes	S				
or registered agent, or both, in the State of Flandillar with and accept the obligations of St	ection 607.0505 Florida Statutes معادل ر	s d E. Wiles, Pre	esident	4-22-96		
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certify that the information indicated on this annual report or supplemental annual report is true and accurate and that rify signature shall have the same legal effect as it made under 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 appears in Block 12 or Block 137 changed for on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Z. Wiles, President 4-22-96

813-949-8438

Daytime Prices #