FILI	E NOW: FILING FEE	AFTER MAY 1	IS \$225.00		
PROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			
	MENT # 57359	9 (8)	770		
1. Corporation ALFAX		` ,			
Principal Place	of Business	Mailing Address			
3801 N WASHINGTON BLVD SARASOTA FL 34234		3801 N WASHINGTON SARASOTA FL 34234	I BLVD		
				3. Date Incorporated or Qualified 3a. 0 05/25/1978	Date of Last Report 03/14/1995
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number 59-1820112	Applied For
Suite, Apt. #	#, etc.	Suite, Apt. #, etc			Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		Orty & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zιρ	Country	Zip	Country	8. This corporation has liability for intangible	
24	25 9. Name and Address of Current	29 Registered Agent	[30]	Fiorida Statutes Yes No. Name and Address of New Register	
-			81 Name	10. Hadine and Address of New Register	eu Agem
HOIGNE			82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
	. Washington Blvd Ota Fl 34234		83		
5					
			84 City	F	85 Zip Code
or registere familiar with	o the provisions of Sections 607,0502 a ed agent, or both, in the State of Florida h, and accept the obligations of, Sectio	and 607.1508, Florida Statuti a. Such change was authoriz m 607.0505, Florida Statutes	es, the above named corpored by the corporation's boar	ation submits this statement for the purpose of 3 of directors. Thereby accept the appointment	changing its registered office as registered agent. Fam
SIGNATURE _					
12.	Signature, typod ov printed name of registeren agent a OFFICERS AND		To Rigistered Agent signature requires 13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	P	☐ DELETE	1 1 TITLE		Change Addition
NAME	HOIGNE, EMIL 3801 N WASHINGTON BLVD		1.2 NAME		
STREET ADDRESS CITY-ST-ZIP	SARASOTA FL		13 STREET ADDRESS		
TITLE	STV	☐ DELETE	2 1 TIVLE		Change Addition
NAME	HOIGNE, NANCY		22 NAME		CT change CT Addition
STREET ADDRESS	3801 N WASHINGTON BLVD		2.3 STMEET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		2.4 C(TY - ST_ZIP		
TITLE NAME	SAYLOR, RICHARD	DELETE	3 1 TITLE		Cnange Addition
STREET ADORESS	3801 N. WASHINGTON BLVD		3.2 NAME		
CITY-ST-ZIP	SARASOTA FL		3.3 STRE-T ADDRESS 3.4 CHY-ST-ZiP		
TITLE		DELETE	4 1 TIFLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP TITLE		DELETE	4.4.017 Y + S7 - ZIP		
NAME		[] better	5 1 TITLE 52 NAME		Change Addition
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5 4 CITY - ST - ZIP		
TITLE		☐ DELETE	6 1 TITLE		Change Addition
NAME Ì			C 24 1147		

6.3 STHEET ADDRESS

STREET ADDRESS

14. I do hereby certify that the information supplied with this sing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. Hurther certify that the information indicated on this annual report or is updemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporator or the receiver or trustee empowered to execute this report as reduired by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or only attachment with an address. SIGNATURE:

SIGNATURE AND TYPES OF PONTED NAME OF SIGNING OFFICER OF DIRECTOR

17 Jan 96 941-355-8823

CR2E034 (12/95)