FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Mar 10 1997 8:00am

Secretary of State

A NABANI AIRII TANAN TINA ARIM INAM ANII DIRRI DIRRI AIRII DIRRI DIRRI DIRRI DIRRI

Sandra B. Morthare

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 573599

(8)

ALFAX CO.

SIGNATURE:

Principal Place 3801 N WASHIN SARASOTA FL (IGTON BLVD	Mailing Address 3801 N WASHINGTON BLVD SARASOTA FL 34234-4834)			2. Data transported of Qualified 29. Data of Last Report		
					3. Date incorporated or Qualified 05/25/1978	04/30/1996		
2. Principal Place of Business 21		2a. Mailing Address 26			4. FEt Number 59-1820112	Applied For Not Applicable		
Suite, Apt. #, etc. 22		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State 23		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zφ	Country	Zip	Country 30	,	This corporation has liability for in Florida Statutes	intangible tax under Yes \tag No	s. 199.032,	
24	25 9. Name and Address of Current		30		10. Name and Address of New Re			
HOM	NE, EMIL	<u>S</u>	81	Name		F		
3801 N. WASHINGTON BLVD			82	Street /	HOIGNE, NANCY it Address (P.O. Box Number is Not Acceptable)			
SARA	ASOTA FL 34234				Address (P.O. Box Number is Not Acceptable) 3801 N. WASHINGTON BLVD			
•			83					
			84	City	SARASOTA	FL 85 32	Code 4234	
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	s, the abov	ı. e-named	corporation submits this statement for the p	ourpose of changing	its registered	
office or re agent. Lar	egistered agent, or both, in the State on familiar with, and accept the obliga	of Florida, Such change was as tions of, Section 607,0505, Flor	uthorized b rida Statute	y the corp s.	oration's board of directors. I hereby accept	ot the appointment a	is registered	
	Stgratter, typica or per grame of registeral agen						1,1997	
*************************	w			ent signature		DATÉ		
12.	OFFICERS AND	DIRECTORS DELETE	13.	·····	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO		
TIBLE NAME	HOIGNE, EMIL	111 DELETE	1.1 TITLE 1.2 NAME			Charge	. Monacion	
STREET ADDRESS	3801 N WASHINGTON BLVD			ADDRESS				
CITY - \$1 - ZIP	SARASOTA FL		1.4 CITY-					
TILE	STV	DELETE	2.1 TITLE	31-24	PSTV	XX Change	Addition	
NAME	HOIGNE, NANCY	_	2.2 NAME		HOLGNE: WANHYNGTON BLV			
STREET ADDRESS	3801 N WASHINGTON BLVD	•	2.3 STREE	ADDRESS		•		
CITY-S1-ZIP	SARASOTA FL		2. 4 CITY-	ST-ZIP	SARASOTA FL 342349			
TITLE		☐ DELETE	3.1 TITLE			☐ Change	Addition	
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREE	T ADDRESS				
CITY - \$1 - ZIP			3.4 CITY-	ST-ZIP				
TITLE		DELETE	4.1 TITLE	-		Change	B Addition	
NAMÉ			4. 2 NAME					
STREET ADDRESS			4.3 STREE	T ADDRESS				
CITY - ST - ZIP		□ 65 575	4.4 CITY-	ST-ZIP			111 4 4 4 4 4	
TITLE		☐ DELETE	5.1 TITLE			L Change	e	
NAVE			5.2 NAME					
STREET ADDRESS				T ADDRESS				
CITY - ST - ZIP TITLE		DELETE	5.4 CITY - 6.1 TITLE	SI - ZIP		Change	e Addition	
NAME		L DECETE	6.2 NAME			C) Chiange	, La Addition	
STREET ADDRESS				ADDRESS				
CITY+ST-ZIP			6.4 City~		•			
14. I do here			y for the ex	emption s	tated in Section 119.07(3)(i), Florida Statute			
f am an o'	m indicated on this annual report or si flicer or director of the corporation or in Block 12 or Block 13 if changed, or	the receiver or trustee empower	ered to exe	urate and cute this r	that my signature shall have the same lega report as required by Chapter 607, Florida S	il effect as if made i Statutes; and that m	under oath; that y name	

SIGNATURE AND TYPE OF PRINTED HAND OF SIGNING OFFICER OR DIRECTOR