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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 597766

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EWING AND EWING, INC.

FILED Mar 13 1997 8:00am Secretary of State

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	e of Business	Mailing Address				INIT AIGH BINI EIGH E	417 W1811 (BB)
5150 EWING R		5150 EWING ROAD					
BARTOW FL 33		BARTOW FL 33830-9684			1		
					3. Date Incorporated or Qualified 12/19/1978	3a. Date of Las 03/04/1996	
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number		Applied For
21	· <u></u>	26			59-1874717		Not Applicabl
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired		5 Additional Required
City & Stat	le	City & State			Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees
Zip	Country	Ζφ	Cou	ntry	8. This corporation has liability for it		r s. 199.032,
<u></u>	25	29	30			Yes No	
	9. Name and Address of Curre	nt Registered Agent		81 Name	10. Name and Address of New Rec	ilstered Agent	
	NG, BENJAMIN F.			81 Name			
) E. EWING ROAD TOW, FL MH 33830			82 Street Add	dress (P.O. Box Number is Not Acceptabl	e)	
	•			83			
			}	84 City		85 Z	ip Code
46 6	1. Abo	00 4 007 4000 5 4 00	0.34 = 20 = 3		rporation submits this statement for the particular points to the particular points board of directors. I hereby accept	FL (**)	
agent. I a	am familiar with, and accept the oblig	rations of, Section 607.0505,	Florida State	utes.	:	тите вррошитель	as registered
• . •	Classian broad as admind stone of a pictored an	oot and title II and Coalify (A)	077 1000 0000			DATE	
	Signature, typed or printed name of registered ag OFFICERS AN			Agent signature requi	uired when reinstaling) ADD(TIONS/CHANGES TO OFFICE	DATE ERS AND DIRECT	ORS IN 12
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I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I flurther certify that the information indicated on this annual report or supplied permental annual report is structed 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 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 B

SIGNATURE: JACASISONALIA IF QUILL DV.P

3-10-197 941-537-1798