FILE NOW, FILING FEE AFTED MAY 1 IS \$225 OD

PROFIT CORPORATION ANNUAL REPORT 1996		Sa Sa	DEPARTMENT (andra B Mortha B coretary of State N OF CORPOR.)				
DOCUI	MENT #	606976	(9)			
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Dringing Place	of Elucinopa						
Principal Place of Business M 18736 U.S. 19 HUDSON FL 34667			Mailing Address 18736 U.S. 19 HUDSON FL 346	67			
						3. Date Incorporated or Qualified 01/11/1979	
2. Principal Place of Business 21. 7946 Bahamu Phrs. 26. 7946 Bahama Phrs. Suite, Apt. #, etc. 22. Suite, Apt. #, etc. 27.						4. FEI Number 59-1879265	
						5. Certificate of Status Desired	
			City & State 28 Port Rich Zip	o F. l.	6. Election Campaign Financing Trust Fund Contribution		
24 346.		0320	29 34668	30 /	ntry USW	8. This corporation has liability for Elorida Statutes 🔲 Ye	
	9. Name and Ad	dress of Current F	legistered Agent		81 Name	10. Name and Address of New	
	N, THOMAS AHAMA AVE.					lress (P.O. Box Number is Not Accepta	
	HEY FL 34668				83		
					84 City		
o reg⊦ster	red agent, or both, in l	the State of Florida.	d 607.1508, Florida S Such change was aut 607.0505, Florida Sta	horized by the c	ve named corpo orporation's boa	oration submits this statement for the pard of directors. Thereby accept the app	
SIGNATURE	-,			_			
12.	Signature, typed or printed no	OFFICERS AND D		NOTE Registeral	Agent signature requi	etwacorendatoge ADDITIONS/CHANGES TO OFF	
TITLE	P	5	DELETE	111	ELE T	ALIGHTOMS/OF MINGES TO OF	
NAME	MEEHAN, THO	MAS		1.2 NA			
STREET ADDRESS	7946 BAHAMA				REFT ADDRESS		
CITY-ST-ZIP	PT. RICHEY FI	L			Y-S1 ZIP		
TITLE	ST		DELETE	2 1 7	. —		
NAME	MEEHAN, MIC	HAEL		2 2 NA	ME		
r							

3a. Date of Last Report 02/28/1995

Applied For Not Applicable

Suite, Apt. #, etc.		Suite, Apt #, etc.	Z-9 10 11 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	5. Certificate of Status Desired See Required \$8.75 Additional Fee Required					
City & State	n. 1	Oity & State 28 Port Richey	,FL,	Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees			
4] 346.	25 A 3 2 0 9. Name and Address of Curren	29 34668	30 Pu 5 w	This corporation has liability for Florida Statutes Yes Name and Address of New F	X No				
7946 B	n, Thomas Ahama ave. Hey Fl 34868		81 Name 82 Street Addr 83	81 Name 82 Street Address (P.O. Brix Number is Not Acceptable)					
			84 City	FL 85 Zip Code					
or reg-ster	to the provisions of Sections 607.0502 ed agent, or both, in the State of Floric th, and accept the obligations of, Secti	ia. Such change was authorize	s, the above named corpor d by the corporation's boa	ation submits this statement for the pur rd of directors. Thereby accept the app	roose of charic	ing its registered office gistered agent. I am			
SIGNATURE _	Signature, typed or printed name of registered agents	10/A) state if appropriate the best	E. Rigi fered Agent signature require	d when renetatings	DATE				
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	ICERS AND D	RECTORS IN 12			
TITLE	P	☐ DELETE	1 1 117LE			Change Addition			
NAME	MEEHAN, THOMAS		1.2 NAME						
STREET ADDRESS	7946 BAHAMA AVE.		1.3 STREET ADDRESS						
CITY - ST - ZIP	PT. RICHEY FL		1.4 CHY+ST ZIP						
TITLE	ST	☐ DELETE	2 1 TrTLE			Change [] Addition			
NAME	MEEHAN, MICHAEL		2.2 NAME						
STREET ADDRESS	1237 N.EGRET PT.		2.3 STREET ADDRESS						
DITY-ST-ZIP	CRYSTAL RIVER FL		2 4 CHY+S1+7IF						
TITLE		☐ DELETE	3 1 TIFLE			Change Addition			
NAME:			3.2 NAME			,			
STREET ADDRESS			3.3 STREET ADDRESS						
CITY-S1-ZIP			3 4 CiTY - S1 - ZiP						
TIFLE		DELETE	4 110LF			Change [7] Add tion			
NAME			4.2 NAME			o lange			
TREET ADDRESS			4.3 STREET ADDRESS						
CHY-SI-ZIP									
TILE		[] DELETE	5 1 TITLE			Change Addition			
IAME .		occirc	5.2 NAME		L.J	undige			
STREET ADORESS									
DITY-ST-ZIP			5.3 STREET ADDRESS						
ilit-21-76		DELETE	54 CITY ST-7F*			Change ED Addition			
iame		Прил				Change 🔲 Addition			
			6.2 NAME						
STREET ADDRESS			6.3 STREET ADDRESS						
HY-ST-ZIP	y cartify that the information currelled u	ith this filips is volunted. Evide	64 City-St-7iP	or the evenintion stated in Section 119.	6.7200.93	()			
re. TUC HU(U)	v seniov man nie miomialion suddied W	and nois incid is vocionizably fordis	a war seno cimes moi arrality b	ar ann eireann ann a stallach in Section 119.	COLUMN E MARION	a Statuted I further 1			

receitly that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or truslee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Thomas Mechan 3-28-96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12.78

Daytine Phone #