CORI ANNU	PROFIT PORATION JAL REPORT 1996	FLORIDA DEPAR Sandra B Secretar DIVISION OF C	Morth y of Sta		
DOCUN 1. Corporation KINGS) (9)			ANN RICH SITH NAN ANN ANN ANN ANN ANN ANN
Principal Place 130 N NARA PORT ST LU		Mailing Address 122 NE NARANJA AVE PORT ST LUCIE FL 349 US	N63	3. Date Incorporated or Qualified	3a. Date of Last Report
2. Principal Pla 1 213 N Suite, Apt. #	I.W. Bentley Circle	28. Mailing Address 26 213 N.W. Suite, Apt. #, etc.	Benley (ircle	02/20/1979 4. FEI Number	03/10/1995 Applied For Not Applicable \$8.75 Additional Fee Required
City & State	St. Lucie, Florida	+	uce, Florida	Election Campaign Financing Trust Fund Contribution This corporation has liability for inflorida Statutes Yes Name and Address of New R	□No
PT ST L 34986	AT / BENTLEY CIR LUCIE, FL of the provisions of Sections 607.0502 a ad agent, or both, in the State of Florida h, and accept the obligations of, Section	nd 607.1508, Flonda Statutes Such change was authorized 607.0505, Florida Statutes	33 34 City	ess (P.O. Box Number is Not Acceptables (P.O. Box Number is Not Acceptables (P.O. Box Number is Not Acceptables (P.O. Box Number is Not Acceptable (P.O. Box Number is Number is Number is Not	FL 85 Zip Code
12. TITLE SAME	Significine, typed or printed state of resentences again at OFFICERS AND P ALTINO, MICHAEL 122 N NARANJA AVE.		13. 1.111E 1.2 N.ME 1.3 STEEL ADDRESS	ADDITIONS/CHANGES TO OFF	DATE CHOCKES AND DIRECTORS IN 12 Change Addition
CITY-ST-ZIP ITLE NAME STREET ADDRESS	PT. ST. LUCIE FL V LINO, VINCENT 213 NW BENTLEY CIR	☐ DELETE	1.4 CP - ST - ZP 2 1 T LE 2 2 NME 2 3 SAEET ADDRESS		Change Addition
ITY-ST-ZIP TLE AME TREET ADDRESS ITY-ST-ZIP	PT ST LUCIE, FL 00000 ST LINO, PAT 213 NW BENTLEY CIR PT ST LUCIE FL	☐ DELETE	2.4 CIY-ST-ZIP 3.1 TLE 3.2 NAME 3.3 SHEET ADDRESS 3.4 CT-ST-ZIP		☐ Change ☐ Addition
ITLE AME TREET ADDRESS ITY - ST - ZIP	V ALTINO, ANTHONY 189 NO CAPRONA AVE PT ST LUCIE FL	☐ D€LETE	4 11 F 4 2 N ¹ E 4.3 S	7:00:000 1 71 -04/15/96019 ***200,00	
ITLE AME TREET ADDRESS ITY-ST-ZIP		☐ DELETE	5 1 T E 5 2 N TE 5 3 S V ET ADDRESS 5 4 CT - S' - ZIP		☐ Change ☐ Addition
ITLE IAME ITREET ADDRESS		☐ DELETE	6 1 T LE 6 2 NAME 6 3 STREET AUDRESS 6 4 CUTY - S1 - ZIP		Change Addition
certify that oath; that I	y certify that the information supplied with the information indicated on this annual I am an officer or director of the corporal Block 12 or Block 13 if changed or on URE:	l report or suppiemental annua fion or the receiver or trustee :	al report is true and accur empowered to execute ti ss.	rate and that my signature shall have th	e same leua: ellect as il made d'idei