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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # 629108

(2)

MEIAL	SPECIALISTS INTERNATIO	JNALE, INC.				
Principal Place	e of Business	Mailing Address			T I MANINE MANINE NAME TO THE TOTAL MANINE TO SE MENDER WIND	ili Albil Bibit Gibil Bibil 1001
1114 FLORIDA AVE SUITE C PALM HARBOR FL 34683		1114 FLORIDA AVE SUITE C PALM HARBOR FL 34683-4331				
					07/09/1979 0	Date of Last Report 4/25/1996
2. Principal Pi	lace of Business	2a. Mailing Address 26			4. FEI Number 59-1926410	Applied For Not Applicable
Suite Apt	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
22		27			5. Certificate of Status Desired	Fee Required
Crty & State	e	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Countr	У	8. This corporation has liability for intangi	
24	25 9. Name and Address of Curr	29	30		Florida Statutes Yes 10. Name and Address of New Registers	□ No
CAL	JTHIER, HENRY T	on negistered Agent	8.	Name	(V. Halle and Address of New Hegister	ni Ageitt
	1 ORANGE COURT		8	Street Ac	dress (P.O. Box Number is Not Acceptable)	
PALI	M HARBOR FL 34683		8:			
			6.			
			84	City	F	85 Zip Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Stati	utes, the above	ve-named co	orporation submits this statement for the purpose ration's board of directors. I hereby accept the a	a of changing its registered
agent La	im familiar with, and accept the obl	ligations of Section 607.0505, F	Florida Statute	es.	ration's count of directors. Thoroby accept the E	ippointment as registeres
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable (NC	OTE: Registered A	gent signature re	quired when reinstating) DATI	E
12.	OFFICERS A	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
THILE	S STATE OF STATES	☐ DELETE	11 THTLE			Change Addition
HAME	DUNKELBERGER, DENICE S 3113 SR 580 L 210	i	12 NAME			
STREET ADDRESS CHIY-ST-ZIP	SAFTEY HARBOR FL		1 3 STREI 1 4 CITY	T ADDRESS		
TITLE	VTD	DELETE	2 1 TITLE			Change Addition
NAME	GAUTHIER, HENRY T.		22 NAME			
STREET ADDRESS	1991 ORANGE CT		2.3 STREI	T ADDRESS		
City-St-769	PALM HARBOR FL		2 4 CITY			
TITLE		☐ DELETE	3 1 TITLE		·	Change Addition
NAME			3.2 NAME			
STHEET ADDRESS				ET ADDRESS		
CRY-SI-ZP TIFLE		DELETE	3.4 CITY 4.1 TITLE			Change Addition
NAME			4. 2 NAM			- · ·
STREET ADDRESS			4.3 STRE	ET ADORESS		
CITY-ST-ZIP			4.4 CITY	ST-ZIP		
lificE		☐ DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS				ET ADDRESS		
CITY - ST - ZiFi		DELETE	5.4 CITY -			Change Addition
TITLE		- Official	6.1 TITLE 6.2 NAME			E Allango E Nacilion
NAME STREET ADDRESS				ET ADDRESS		
CHY - \$1 - 7JP	•		6 4 City	ST-7IP		
14. I do herel	by certify that the information supp	lied with this filing does not qua	alify for the ex	emption sta	ted in Section 119.07(3)(i), Florida Statutes. I fur	ther certify that the
Information Lam ari o appears i	on inclinated on this annual report of officer or director of the consoration in Block 12 or Block 13 is changed	or suppremental annual report is or the receiver or trustee empo , or on an altach rest with an a	strue and accomeration of the control of the contro	urate and the	ited in Section 119.07(3)(i), Florida Statutes. I fur hat my signature shall have the same legal effec port as required by Chapter 607, Florida Statutes	t as it made under path; that s; and that my name

SIGNATURE:

2-26-97

813.785.4444

FILED

Mar 05 1997 8:00am

Secretary of State