FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00					FILED	
COF	PROFIT FLORIDA DEPARTMENT OF STATE ORPORATION Sandra B. Mortham			Feb 03 1997 8:00am		
	JAL REPORT 1997		Secretary of State DIVISION OF CORPORATIONS		Secretary of State	
	MENT # 6	31261 NC.	(5)			
Principal Place of Business Mailing Address FLANAGAN & BAKER, P.A., CPA'S FLANAGAN & BAKER, P.A., C 2831 RINGLING BLVD. 2831 RINGLING BOULEVARD SARASOTA FL 34237-5349 SARASOTA FL 34237-5334 US US					3. Date Incorporated or Qualified	38. Date of Last Report
2. Principal P	lace of Business	28. 1	Address		07/30/1979 4. FEI Number	05/01/1996
21 Suite, Apt.	# etc	26	Suite, Apt #, etc.		59-2037097	Not Applicable
22		27	uite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat 23	e	28	Dity & State		 Election Campaign Financing Trust Fund Contribution 	\$5.00 May Be Added to Fees
Zip	Cour	ntry Z	'np	Country	8. This corporation has liability for	intangible tax under s. 199.032,
24	9. Name and Add	29 Iress of Current Registe		30	Florida Statutes	Yes No
	WICK & GRIFFIS, P	2.A.		81 Name		
	1 MAIN STREET ASOTA FL 33577			82 Street Add	Iress (P.O. Box Number is Not Acceptat	ole)
				83	· · · · · · · · · · · · · · · · · · ·	······
				84 City	· · · · · · · · · · · · · · · · · · ·	FL 85 Zip Code
11. Pursuant	to the provisions of Se registered agent, or be	ections 607.0502 and 607	.1508, Florida Statute	s, the above-named cor	poration submits this statement for the p tion's board of directors. I hereby acce	purpose of changing its registered
agentia	in familiar with, and a	ccept the obligations of, s	Section 607.0505, Flo	rida Statutes.	ator's board of directors. Thereby accept	or the appointment as registered
SIGNATURE.	Signature, typical or printed n	the of registered agent and tile if a		Registered Agent signature requ		DATE
12. TITLE	PTD	OFFICERS AND DIRECT		13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
NAME	WEBER, JOHN	_		1.2 NAME		4
STREET ADDRESS	90 WOOLWICH S BRESLAU ONT.,			1.3 STREET ADDRESS		
CITY - ST - ZIP TITLE	DRESLAU UNT.,		DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME				2.2 NAME		
STREET ADDRESS				2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE			DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME				3.2 NAME		
STREET ADDRESS				3.3 STREET ADDRESS		
CITY - ST - ZIP TITLE			DELETE	3.4. CITY-ST-ZIP		
NAME				4.1 TITLE 4. 2 NAME		Change [_] Addition
STREET ADDRESS	i			4.3 STREET ADDRESS		
CITY - ST - ZIP				4.4 CITY - ST- ZIP	·····	
TITLE NAME			DELETE	5.1 TITLE 5.2 NAME		Change 🛄 Addition
STREET ADDRESS				5.3 STREET ADDRESS		
CITY - ST - ZIP		······		5.4 CITY - ST- ZIP		
TITLE				6.1 TITLE		Change Addition
NAME STREET ADDRESS				6.2 NAME 6.3 STREET ADDRESS		
CITY - \$1 - ZIP				6.4 CITY - ST - ZIP		
l am an o appears i	in Indicated on this an fficer or director of the in Block 12 or Block 1	inual report or supplement corporation or the receiv 3 if changed, or on an att	tal annual report is tru	/ for the exemption state ue and accurate and tha	d in Section 119.07(3)(i), Florida Statule t my signature shall have the same legs in as required by Chapter 607, Florida S	l effect as if made under oath; that itatutes; and that my name
SIGNATURE J. WEBER. Statut 11 Jan. 14/96						