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	JMENT # 76048	86 (1)			
	IDA GIRLS' STATE, INC.				
Principal Place			····,,-		
Principal Place		Mailing Address P.O. BOX 547917		f 100/10 JOBIN Olde Gales wards wards with	QIII OFOR VIDA VIVA BADA VIVA VIVA VIVA
ORLANDO FI US		ORLANDO FL 32854-79 US	917	<ul> <li>Data basemanated or Duslified</li> </ul>	Densed
* Drincipal P	Place of Business			3. Date Incorporated or Qualified 10/19/1981	3a. Date of Last Report 04/03/1995
1 1912 <i>A</i>	A LEE ROAD	2a. Mailing Address 26		4. FEI Number 59-0520130	Applied For Not Applicable
Suite, Apt. : 2	·	Suite, Apt. #, etc. 27		5. Certificate of Status Desired	S8.75 Additional Fee Regulard
City & State	te NDO FLORIDA	City & State		6. Election Campaign Financing Trust Fund Contribution	<b>\$5.00</b> May Be
Zip 4 3281	Country 25 US	Zip 29	Country 30	8. This corporation has liability for int	ntangible tax under s. 199.032,
	9. Name and Address of Curr			Florida Statutes	Yes No
MAHON	NEY, MARIE		81 Name		
1912 LE	EE ROAD		191	Address (P.O. Box Number is Not Acceptable	>>
	DO FL 32810		83	<u></u>	
			84 City	······································	FI 85 Zip Code
		The second state Decked			FL
11. Pursuant i or register	to the provisions of Sections 617.05 red agent, or both, in the State of Fic	102 and 617.1508, Florida Statuti orida. Such change was authorizi	es, the above-named cor ed by the corporation's b	rporation submits this statement for the purp board of directors. I hereby accept the appoir	Ose of changing its registered office otment as registered agent. I am
SIGNATURE _		control 1			ose of changing its registered office intment as registered agent. I am
SIGNATURE _	Signature, typeo or printed name of registered age	control 1	es, the above-named correct by the corporation's b s. DTE: Registered Agent signature rec 13.	quired when reinstating)	Dose of changing its registered office intment as registered agent. I am
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SIGNATURE	Signature, typeo or printed name of registered ag- OFFICERS A D SHEETS, PHYLLIS W 7201 MIAMI LAKES DR B15 MIAMI LAKES FL PD PELUSO, ELIZABETH 340 PONTE VEDRA RD PALM SPRINGS FL VD FRASER, SHIRLEY 2335 BAYVIEW RD JACKSONVILLE FL STD MAHONEY, MARIE 1912 LEE ROAD ORLANDO FL	Control of Automatic (NO AND DIRECTORS	TTE: Registered Agent signature rec 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY - ST - ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY - ST - ZIP	PD SHIRLEY FRASER 2335 BAYVIEW ROAD JACKSONVILLE FL 32210 VD PATRICIA M DONOHUE 1659 NE 23RD TERRACE JENSEN BEACH FL 34957 1912A LEE ROAD	Des of changing its registered office intment as registered agent. I am DATE DATE DERS AND DIFIECTORS IN 12 Change Addition Change XX Addition Change X Addition Change Addition Change Addition Change Addition
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