FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

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THE W	MENT # 81685 /EALDEN COMPANY	3 (6)			
noipal Place c 12168 SE 17 BELLEVUE W	PL	Mailing Address 12168 SE 17 PL BELLEVUE WA 98005	1	4 188181 18181 11918 BIND 18181 I	81188 1117 91911 91811 81811 81817 91911 81911
				3. Date Incorporated or Qualified 04/19/1963	3a. Date of Last Report 03/28/1995
Principa! Piac	e of Business	2a. Mailing Address		4. FEI Number	Applied Fo
Suite, Apt. #,	. e!c	Suite, Apt. #, etc.		51-0099612	Not Applica \$8.75 Additiona
		27		5. Certificate of Status Desired	Fee Required
Dity & State		City & State		6. Election Campaign Financing	\$5.00 May Be
- γ _{ιμ}	Country	7/p	Country	Trust Fund Contribution 8. This corporation has liability for	or intangible tax under s 199.032,
	25 9. Name and Address of Current	29 Registered Agent	30	Florida Statutes	
			81 Name		
1200 S.	PORATION SYSTEM PINE ISLAND ROAD		82 Street A	ddress (P.O. Box Number is Not Accepta	able)
PLANIA	TION FL 33324		84 City		85 Zip Code
			OT Oily		FI 85 Zip Code
 or registered 	o agent, or both, in the State of Florid	a. Such change was authorize	ed by the corporation's b	poration submits this statement for the population of directors. I hereby accept the ap-	urpose of changing its registered of
or registered familiar with SNATUREsi	of agent, or both, in the State of Florid, , and accept the obligations of, Section (greener type) or printed name of registered agent a	a. Such change was authorize in 607.0505, Florida Statutes included applicable (NO	ed by the corporation's b	poard of directors. I hereby accept the application of directors.	ourpose of changing its registered oppointment as registered agent. I are
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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(206) 746 - 5448 Daytime Phone #