FIL	E NOW: FILI	NG FEE AF	TER MAY 1	IS \$22	5.00				
}	PROFIT	SE TO	FLORIDA DEP				7		
	rporation Ual report	MALIA	Sandr	ra B. Mortham					
AUNIX	1996			elary of State					
		(4) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	DIVISION O	F CORPORA	TIONS]		
DOCU 1, Corporation	MENT # {	335821	(O)						
1 '	ERT B. AIKENS &	ACCUUINTEC	IAIA AIAI						
11000	IN D. AINLING II	MOOULINIES	, ING.				F EDDINE IDIDO INCOL POLICE NO	ÆL MEL BIBJI BIBG	() 010 () 0 (0)(010 () 0 (0)(10 ()
Din - In al Din a			×						
Principal Place			Mailing Address 5100 N. 9TH AVENUI				1 146141 (8100 HIB) B1(81 0110 HB	Di Nivi Qiyil Qivi	ı eren atan ələn ələn ilən ibel
C/P RAIFO	5100 N. 9TH AVENUE C/P RAIFORD SIBLEY			E Y					
PENSACOL	A FL 32504		PENSACOLA FL 3250				Date Incorporated or Qualified	Tag Date	of Last Report
- 500000		····					02/23/1976		of Last Report I/04/1995
2. Principal P	face of Business	21	2a. Mailing Address				4. FEI Number		Applied For
Suite, Apt.	Suite, Apt. #, etc.		Suite, Apt. #, etc.				38-1850898		Not Applicable
22 City & Stat			27]				5. Certificate of Status Desired		\$8.75 Additional Fee Required
City & Stat	e	21	City & State				6. Election Campaign Financing		\$5.00 May Be
Zip	Countr		Zip	Countr	γ	na	Trust Fund Contribution 8. This corporation has liability for i		Added to Fees
24	9. Name and Addre	25		30			Florida Statutes 🔲 Yes	🔣 No	
	9, Hallie Billy Music	ess of Current het	Jistered Agent	8.	1 Name		10. Name and Address of New R	egistered A	gent
	SIBLEY, RAIFORD					Address	s (P.O. Box Number is Not Acceptab	T	
	I. 9TH AVE.			82		Addres	S (F.O. BOX NUMBER IS NOT ACCEPTED	le)	
PENDA	COLA FL 32504			83	3				
				84	1 - 3			FI	85 Zip Code
11. Pursuant or register	to the provisions of Section ed agent, or both, in the	ons 607.0502 and 6 State of Florida, Su	807.1508, Florida Statution	ies, the above	named co	prporati	on submits this statement for the pur of directors. I hereby accept the appo	pose of chang	ging its registered office
familiar wi	th, and accept the obliga	tions of, Section 60	7.0505, Florida Statutes	3.	porations	DUGING	of directors. Thereby accept the appo	pintment as re	gistered agent. I am
SIGNATURE _	Signature, typed or printed name i			D1F. Bug stered Age	nt signature n	oquired wi	hen reinstafing)	DATE	
12. TITLE	l D	FFICERS AND DIFI	ECTORS	13.			ADDITIONS/CHANGES TO OFFI	CERS AND D	
NAME	AIKENS, ROBERT	T B	☐ DELETE	1 1 TITLE					Change Addition
STREET ADDRESS	320 CRANBROOM	〈		1.3 STREE	T ADDRESS				
CITY-ST-ZIP	BIRMINGHAM, MI	00000	==-,	1.4 CiTY-					
TITLE	V 	AL I	[] DELETE	2 1 7171.6					Change Addition
NAME STREET ADDRESS	4905 PELLETEIR	ЖJ		2.2 NAME					
CITY-ST-ZIP	ORCHARD LAKE	MI		2.3 STREE 2.4 CHTY-	T ADDRESS ST-ZIP				
TITLE			☐ DELETE	3 1 THLE					Change Addition
NAME Street address				3.2 NAME	j				· -
CITY-ST-ZIP					T ADDRESS				
TITLE	7 7 10 10 10 10 10 10 10 10 10 10 10 10 10		DELETE	3.4 CITY~ : 4. 1 TITLE	S1-ZIF				Change Addition
NAME SISSEL ADDRESS				4 2 NAME				_	Vilaings
STREET ADDRESS CITY-ST-ZIP					T ADDRESS				
TITLE			[] DELETE	4.4 CHY-5 5.1 TI*LE	ST-ZIP				Change
NAME				5.2 NAME				L	onange [] naunon
STREET ADDRESS				5 3 STREET	ADDRESS				
CITY-ST-ZIP TITLE			DELETE	5.4 CITY - 5	ST-ZIP				
NAME				6 1 TITLE 6.2 NAME				LI	Change
STREET ADDRESS				63 STREET	ADDRESS				
City-St-ZiP	certify that the informati	on supplied with thi	e fil no le voluntarily fund	6 4 City-s	ST-ZIP		ne exemption stated in Section 119.0		
		Our aciditations arises the	Siling to voluntarily turns	is ieu anu uce	S NOt Quan	ily for u	18 exemption stated in Section 119 0	7(3)(k) Florida	a Statutor I further

14. Too hereby certify that the information supplied with this fling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13. I changed, or on an attachment with an address.

SIGNATURE:

Patrick J. Finerty

April 19, 1996 810-362-1370

Desprine Proce #