CORP( ANNUA	ROFIT ORATION L REPORT 996	Sandra Secreta	RTMENT OF STATE B. Mortham ary of State CORPORATIONS			
orporation Na	ENT # 85503	~ /		I NADION TANÀN KINAK ANUN KATARA NY	E) D) D) D) D) D BLAFF D(D) D(D) D)	
ipal Place of	Business	Mailing Address	n in Landa andra da			
'00 5th ct. DSt office Rmingham /		3700 STH CT. N. POST OFFICE BOX 1 BIRMINGHAM AL 352(		<ol> <li>Date incorporated or Qualified 12/16/1982</li> </ol>	3a. Date of Lest Rep 04/20/199	
incipal Place	e of Business	2a. Mailing Address 26	·····	4. FEI Number 63-0829605	A	oplied For ot Applicable
ile, Apt. #. e	<b>e</b> tc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	<b>\$8.75</b>	Additional equired
/ & State		City & State		6. Election Campaign Financing Trust Fund Contribution	1	May Be to Fees
	Country 25 9. Name and Address of Curre	Ζφ 29	Country 30	<ol> <li>This corporation has liability for Florida Statutes Yes</li> <li>Name and Address of New R</li> </ol>	<b>□</b> No	99.032,
			81 Name			
	, <del>r</del> obert M. Le Blvd.		62 Street Add	dress (P.O. Box Number is Not Acceptab	<del>)</del> ( <del>)</del>	
7515 GUL NAVARRE	LF BLVD. E BEACH FL 32561		<b>63</b> <b>64</b> City	· · · · · · · · · · · · · · · · · · ·	<b>FL</b> 85 Zip	Code
7515 GUL NAVARRE	LF BLVD. E BEACH FL 32561 the provisions of Sections 607.050 agent, or both, in the State of Fio and accept the obligations of, Sec ratific taxet or period taxe of regulated ag-	rida. Such change was authorizi ction 607.0505, Florida Statutes	63 64 City es, the above-named corporation's box	pration submits this statement for the pur ard of directors. I hereby accept the appr	FL 85 Zip rpose of changing its re- ointment as registered a	gistered offic agent. I am
7515 GUL NAVARRE	LF BLVD. E BEACH FL 32561 the provisions of Sections 607.050 agent, or both, in the State of Fio and accept the obligations of, Sec rative, taxet or perited name of negatived ag- OFFICERS At P	rida. Such change was authorize ction 607.0505, Florida Statutes	B3     B4     City es, the above-named corporation's boo  TL Registered Agent signature require     13.     1.1 TILE	pration submits this statement for the pur and of directors. I hereby accept the apport	FL 85 Zip rpose of changing its re- ointment as registered a DATE ICERS AND DIRECTOR	gistered offi agent. I am
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