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

1996

DOCUM 1. Corporation N PINE C		7 (2)						
Principal Place of Business M 636 WEST OAKRIDGE RD % EMIL J. VIDIC PINE CASTLE FL 32809		% EMIL J. VIDIC	636 WEST OAKRIDGE RD		3. Date Incorporated or Qualified 3a. Date of Last Report 10/21/1980 02/27/1995			
2. Principal Place	of Busness	2a. Mailing Address			4. FEI Number			Applied For
1	,	26			59-2034333			Not Applicable
Suite Apt. #,	etc	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional Required
Oty & State		City & State	City & State		Election Campaign Financing Trust Fund Contribution			00 May Be sed to Fees
]	Country	Zip	Country	,	8. This corporation has liability fo			
1	9. Name and Address of Current F	29 Registered Agent	[30]		Florida Statutes Ye	Registered	Agent	
			81	Name	10. (10.110 0.110 0.1101)			
VIDIC, EMIL J. 636 WEST OAKRIDGE RD			82	Street Addr	ess (P.O. Box Number is Not Accept	able)		
PINE CA	STLE FL 32809		83					
			84	City			85 Zu	p Code
	the provisions of Sections 607,0502 at agent, or both, in the State of Florida and accept the obligations of Section	nd 607.1508, Florida Statute Such change was authorize 607.0505, Florida Statutes	es, the above red by the corp	named corpor location is boar	ration submits this statement for the p rd of directors. I hereby accept the ap	FL ourpose of cha opointment as	anging its r registered	egistered office Lagent Lam
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reprincestly certify that the information supplied with this ling is voluntarily turnished and does not quality for the exemption stated in Section 119.07(5)(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 carry, 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 if changed, or or an attachment with an address.

SIGNATURE: 1-29-96 407-889-8760