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f	PROFIT		FLORIDA DEPAR	RTMENT OF STATE			`
	RPORATION JAL REPORT			S. Mortham	Jan 15 199	98 8:UU)am
	1998			ry of State CORPORATIONS	Coorator	r of Ct	oto
					Secretary	y or St	ale
DOCUI 1. Corporation	MENT# F	- 04265	(7)				
	INCORPORATE	D	` '				
						F 340 44 0 1011 3 4024 01314 01	COL BUILD DA EL
Principal Place	o of Business		Maritima A alabasana	····			
3046 WALDE		•	Mailing Address 3046 WALDEN ROAD			•	
	E FL 32311-7905		TALLAHASSEE FL 32311	-7905			
ı					DO NOT WRITE ! 3. Date Incorporated or Qualified	IN THIS SPACE	
		702			11/04/1980		
<u> </u>	lace of Business	 	a. Mailing Address	**	4. FEI Number		oplied For
Suite, Apt.	#, etc.	26	Suite, Apt. #, etc.		25-1290868	<u>ΦΩ 75</u>	ot Applicable Additional
22		27	- · · · · · · · · · · · · · · · · · · ·		5. Certificate of Status Desired		equired
City & State	e		City & State		6. Election Campaign Financing		May Be
Zip	Coun	itry 28	Zip	Country	Trust Fund Contribution 8. This corporation owes or has paid		to Fees
24	25	29	<u></u>	30	Personal Property Tax due June 3] No
		ress of Current Reg	stered Agent	81 Name	10. Name and Address of New Reg	istered Agent	
	Dakis, John 46 Walden Road						
	LLAHASSEE FL 323	311		82 Street Ad	dress (P.O. Box Number is Not Acceptable	9)	
				83			
				84 City		85 Zip	Code
11. Pursuant t	to the provisions of Se	ctions 607.0502 and	607.1508, Florida Statute	es, the above-named co	prporation submits this statement for the pu	rpose of changing it	s registered
office or re agent. I ar	egistered agent, or bo	ith, in the State of Flor	rida. Such change was a	uitharized by the corner			
	m ramiliar with, and ac	cept the obligations	of, Section 607.0505, Flo	rida Statutes.	orporation submits this statement for the puration's board of directors. I hereby accept	the appointment as	registered
SIGNATURE	Ave Held	- BOOKAY	A EMPEKES	Dechar.		Lederse	registered
SIGNATURE	Signature, typed or printed nar	- BOOKAY	de if applicable. (NOTE	rida Statutes. Registered Agent Signature rec		LHOLL BY BY	
SIGNATURE 12.	Signature, typed or printed har	me of registered agent and tit	de if applicable. (NOTE	Registered Agent Signature rec	quired when reinstating)	LHOLL BY BY	
SIGNATURE 12. IIILE NAME	Signature, typed or printed nar D DALEY, JULIA	me of registered agent and titl OFFICERS AND DIRE	de if applicable. (NOTE	E. Registered Agent Signature rec 13. 1.1 TITLE 1.2 NAME	quired when reinstating)	LUGATORS DATE RS AND DIRECTOR	
SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed or priviled have D DALEY, JULIA RT 1 BOX 31850	me of registered agent and the OFFICERS AND DIRE	de if applicable. (NOTE	Registered Agent Signature recently 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	quired when reinstating)	LUGATORS DATE RS AND DIRECTOR	
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