FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Alvivi	1997	Secretary of State DIVISION OF CORPORATION				N\$	Secretary of State				
•		# F25111 GENCY, INC.		(8)							
											
Principal Place of Business Mailing Address								i immirmen bisen tinnni mirika tihan kladit tida	SIBIL BIRL) SISL BISLI	TIBIL RI	
2605 Sunset Way St. Pete Beach Fl 33706				2605 SUNSET WAY ST. PETE BEACH FL 33706-4128							
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								3. Date Incorporated or Qualified	3a. Date of La		port
2. Principal F	Place of Busine	\$S	2a. I	Mailing Address	·····			03/12/1981 4. FEI Number	12/30/199		plied For
21			26	· ·				59-2098767	<u> </u>		Applicable
Suite, Apt.	#, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.	75 A	dditional
City & Stat	······································		27	Cib. P. Ctoto					Fe		quired
23	le		28	City & State				Election Campaign Financing Trust Fund Contribution			May Be o Fees
Z ₍ p	T.	Country		?ip	Coun	try		This corporation has liability for			
24	2	- L	29		30			Florida Statutes]Yes ☐ No	, D.	100.002,
	9. Name a	nd Address of Curre	nt Registe	red Agent				10, Name and Address of New Re	gistered Agent		
		RD GARDNER			1	91	Name	•			
	5 SUNSET W. PETE BEACH				1	32	Street Add	dress (P.O. Box Number is Not Accepta	ole)		· · · · · · · · · · · · · · · · · · ·
V 1. 1	CIC DENOIS	1 2 00/00			1	33					
					<u> </u>	34	City		85	Zip C	code
## Diversional	to the manifold	60-10 607.05	00 00	2 4500 Florido Otol					- FL	,	
office or i	registered age	ns or Sections 607.05 nt, or both, in the State	e of Florida	. Such change was	tes, the abo authorized	by 1	named cor the corpora	poration submits this statement for the pation's board of directors. I hereby acce	surpose of changi of the appointmen	ng its it as i	registered registered
	am familiar with	, and accept the oblig	gations of,	Section 607.0505, FI	orida Statu	tes.					_
SIGNATURE	Signature, typed or	printed name of registered ag	ent and title f	applicable (NO	E: Registered	Agent	t signature requ	uited when reinstating)	DATE	····	[
12.	p	OFFICERS AN	ID DIRECT		13.			ADDITIONS/CHANGES TO OFFI	CERS AND DIREC	TOR	S IN 12
TITLE	PD			☐ DELETE	1.1 TITE	E	ļ		☐ Cha	nge	Addition
NAME		HOWARD G			1.2 NAM		- 1				
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CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 if changed, or on an attachment with an address.

SIGNATURE:

3-1197

Daytime Phone # 0007748

FILED

Mar 17 1997 8:00am