7, 3197 6-3758 C-FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNILIAL PEPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

AIVIN	1997		Secretary of State DIVISION OF CORPORATIONS		ONS	Secretary of State		
1. Corporation	MENT # F IUDGE, INC.	28639	(5)				2004	DIAN MAN
Principal Plac	ce of Business	Mailu	ng Address				ANTAN BUDUK BADAK BADAK BADAK I	DIN HO
116/126 6TH A ST. PETERSBU US	VENUE NE	9241	9241 MERRIMOOR BLVD LARGO FL 33777-3029					
						3. Date Incorporated or Qualified 04/07/1981	3a. Date of Last R 03/07/1996	leport
2. Principal F 21	Place of Husiness	2a. M	ailing Address			4. FEI Number 59-2061915		pplied For ot Applicable
Suite, Apt 22	#, etc.	S 27	uite, Apt. #, etc			5. Certificate of Status Desired	7	Additional equired
City & Sta 23	le.	28	ity & State			Election Campaign Financing Trust Fund Contribution		May Be to Fees
Ζψ 24	Cour 25	29	ıp	Country 30	f		Yes 🗌 No	i. 1 9 9.032,
		Iress of Current Register	red Agent	81	Name	10. Name and Address of New Re	gistered Agent	
	ge, janet I merrimoor blvi)				(5.0.6)		
	GO FL 34647-0029	•		82	Street Add	dress (P.O. Box Number is Not Acceptab	He)	l
				83				
				84	City		FL 85 Zip	Code
office or agent 1.	registered agent, or be	ections 607 0502 and 607 oth, in the State of Florida coopt the obligations of, S	Such change was a	authorized by	the corpora	poration submits this statement for the patients board of directors. I hereby accept	ournose of changing in	ts registered registered
SIGNATURE	Signature, type For printed in	anic of registered agent and title if a			ent signature requ	uired when reinstating)	DATE	
12.	ГБ	OFFICERS AND DIRECT	ors Delete	13.	T	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTOR Change	RS IN 12
TITLE NAME	JUDGE, JANET		[] Detert	1.1 TITLE 1.2 NAME			Criange	L Audinoit
STREET ADDRESS	ANAL MEDDINA	R BLVD		1.3 STREET	ADDRESS			Į,
CITY - ST - ZIP	LARGO FL			1.4 CITY-5	i i			
THEE			☐ DELETE	21 TITLE		110 yr 1 1100 yr	☐ Change	Addition
NAME				2.2 NAME				
STREET ADDRESS				2.3 STREET	ADDRESS			
CHY-ST ZIP			DELETE	2.4 CITY-	ST-ZIP		Change	Addition
title Name			[] betele	3.1 TITLE 3.2 NAME			Criange	L AUGMENT
STREET ADDRESS				3.3 STREE	L AUUNESS			
CITY-ST-ZIP				3.4. CITY-				
TIFLE			DELETE	4 1 THTLE			Change	Addition
NAME				4. 2 NAME	ļ			ŧ
STREET ADJURESS				4.3 STREE	ADDRESS			
City St 70			DELETE	4.4 CITY-	ST-ZIP		Change	Addition
TIFLE			☐ bettie	5.1 TITLE	ļ		☐ Cuaillic	E AUGRICAT
NAME eroeta encuesa				5.2 NAME 5.3 STREE	I ADDRESS			
STREET ADDRESS CHTY ST-74P				5.3 STREE	ì			}
IIILE			DELETE	61 TITLE			☐ Change	Addition
NAME				6.2 NAME				}
STREET ADORESS				6.3 SYREE	T ADDRESS			
	I							

14. If 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:

SIGNATURE AND TYPE OR PRIN ED NAME OF SIGNING OFFICER ON DIRECTOR

0363051

FILED

Mar 31 1997 8:00am