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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DECK	ER INSTRUMENTS, INC.				III BYRYI BIRIX BIRIX BIRIX BYRYI BIRIX IBRI
rincipal Place	of Business	Mailing Address			
13709 S.APOPKA-VNLND ROAD ORLANDO FL 32821		13709 S.APOPKA-VNLND ROAD ORLANDO FL 32821			
:= <u>;</u> ;- 		A		3. Date Incorporated or Qualified 3 04/15/1981	9a. Date of Last Report 06/15/1995
2. Principal Pl.	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt.	#, etc.	26 Suite, Apt. #, etc.		59-2159657	Not Applicable
		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Oity & Stale	}	City & State		6. Flection Campaign Financing	\$5.00 May Be
710		28		Trust Fund Contribution	Added to Fees
- <i>Ζ</i> ιρ 	Country 25	2 _{ip}	Country	8. This corporation has liability for intar	
L	9. Name and Address of Curre		[30] 	Florida Statutes Yes To. Name and Address of New Regi	
		·-····································	81 Name	To, traine and Address of New Regi	stered Agent
	r, elizabeth		82 Street Add	lress (P.O. Box Number is Not Acceptable)	
13709 \$			OZ Street Add	iless (r.O. Box Nomber is Not Acceptable)	
ORLANI	DO FL 32821		83		
			84 City		■ 85 Zip Code
1. Pursuant to	the provisions of Sections 607.050	2 and 607 1500 Florida Ct. 1	: -,,:		I -1 ! ! '
or registere familiar wit	ed agent, or both, in the State of Flor h, and accept the obligations of, Sec	ida. Such change was autho Hon 607.0505, Florida Statut	rized by the corporation's boa es	ard of directors. Thereby accept the appointn	ment as registered agent. I am
IGNATURE .	Styristine, type o or printed name of registerics ages. OFFICERS AN	It and the mappingares (rized by the corporation's boales NOTH Regulated Agent synator, require 13.		DÄTE
IGNATURE 2.	Standard, tyled or protect carbologing states age. OFFICERS AN PD	I and the it application (NOTE: Bog-bood Agent signature require		DÄTE
IGNATURE	Styriche, types of protect name of regions agree OFFICERS AN PD DECKER, ELIZABETH B	It and the mappingares (NOTE: Bog-bood Agent signature require 13. 1.11 RF 12 NAME	al when resistate gr	DATE RS AND DIRECTORS IN 12
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SIGNATURE: Élisabeth B. Decker
SIGNATURE NO TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-27-96

Daytin e Priving #