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PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham "

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F33079

(7)

DEWITT CASEY COMPANY

FILED Feb 07 1997 8:00am Secretary of State

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	e of Business	Mailing Address				
333 W MCNA Litte 203	8 KU	8333 W MCNAB RO Suite 203				
AMARAC FL	33321	TAMARAC FL 33321-3	203			
US		US		3. Date Incorporated or Qualified 05/01/1981	3a. Date of Last I 02/02/1996	Report
Principal F	Place of Business	2a. Mailing Address		4. FEI Number		pplied For
		26		59-2105608		ot Applicat
Suite, Apt		Suite, Apt #, etc.		5. Certificate of Status Desired	7 "	Additional equired
City & Stat	<i>te 135</i>	27 Sujte City & State	103	6. Election Campaign Financing		May Be
	••	28		Trust Fund Contribution		to Fees
Ζιρ	Country	Zip	Country	8. This corporation has liability for in		
	25	29	30	Florida Statutes	Yes No	
	9. Name and Address of Cur	rrent Registered Agent		10. Name and Address of New Reg	pistered Agent	
CAS	SEY, DEWITT C., JR.		81 Name	without M. CAC	C1/	
833	3 W. MCNAB RD		82 Street Add	dress (P.O. Box Number is Not Acceptable	le)	<u></u>
STE	107		833.	3 W. MENAL RO	Ø	
TAN	MARAC FL 33321		83	-		
			84 City	5.125	ne Za	Codo
				MARAC		Code
Pursuant	to the provisions of Sections 607	0502 and 607.1508. Florida S	tatutes, the above-named co	rporation submits this statement for the pu	urpose of changing	its registe
office or	registered agent, or both, in the S	tate of Florida, Such change v	was authorized by the corpor	ation's board of directors. I hereby accep	t the appointment a	s registere
	ant familiar with, and accept the of	Dilganons of, Section 607.0303	, Florida Statutes.		110-	
INATURE	Storature, lybed or bricket name of repisterer	d agent par title if applicable	(NOTE Registered Agent signature reg	urired when reinstating)	DATE	
	Signature, typed or prictic crame of registered OFFICERS		(NOTE Registered Agent signature req		DATE ERS AND DIRECTOR	RS IN 12
	OFFICERS	a agent when tapp scable AND DIRECTORS DELETE	13.	uired when renstating) ADDITIONS/CHANGES TO OFFICE	DATE/ ERS AND DIRECTO	
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I do notedy certify that the information supplied with this fairing does not quality 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 schanged, or on an attachment with an address.

SIGNATURE: CLANTON IN THE DRIPH OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/3/97 954-720-0036 Date Deptire Phone #