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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

-	JMENT # F55519 CORPORATION	9 (5)			A MARIAN THA SUMA MANA CANA AND AND AND AND AND AND AND AND AND	CH Diah Dia ki	BIBII BIBIK BIBIK I	NARI JEN
Principal P.s	ace of Business	Mailing Address						
<u>'</u>	WEST BLVD #100	6355 METROWEST BLVD # ORLANDO FL 32635-6217	100					,
				·	3. Date Incorporated or Qualifier 11/20/1981		Date of Last Re /01/1996	
2. Principal Place of Business 2a. Mailing Addres					4. FEI Number		—	plied For t Applicable
Suite, Ap	ot #, etc	Suite, Apt. #, etc.	Suite, Apt. #, etc.		NOT APPLICABLE		\$8.75	
22	·	27			5. Certificate of Status Desired		Fee Re	
City & St	ate	City & State	28		Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	
Zip 24			Country 30		Florida Statutes			
	9. Name and Address of Curr	rent Registered Agent	81	Name	10. Name and Address of New	Registered	d Agent	
	JBKER, WARREN							
8825 CRENSHAW DRIVE			82	Street Add	Street Address (P.O. Box Number is Not Acceptable)			
UH	LANDO FL 32835		83				······································	
			84	City		FI	85 Zip (Code
11. Pursuar	nt to the provisions of Sections 607.0	0502 and 607.1508, Florida Statute	es, the abov	e-named cor	poration submits this statement for th		of changing it	s registered
agent I					poration submits this statement for thation's board of directors. I hereby account of the statement for the statement of the	DATE		
12.		AND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OF	FICERS AN	ND DIRECTOR Change	S IN 12
TITLE	PTS	rio					T"1 CLKNIĞO	□ Nontion
NAME STREET ADORES	WUBKER, WARREN	1400	1.2 NAME 1.3 STREET ADDRESS					
CITY-S1-ZIF	6355 METRO WEST BLVD. (ORLANDO, FL 00000	FIUU	1.4 CITY - ST - ZIP					
THE	D DELETE		2.1 TITLE				Change	Addition
NAME	JONES, RICHARD		2.2 NAME	ľ				
STREET ADDRESS	STREEL ADDRESS 8355 METRO WEST BLVD. #100			ADDRESS				
CHY-ST-7#	ORLANDO, FL 00000			ST-ZIP			T 7.	1.00
THILE	VSD		31 TITLE 32 NAME				Change	Addition
NAME	HALL, CHARLES			, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
STREET ADDRESS	OOO MEILO NEOL DEID. WILL			ADDRESS				
CHY-ST-Zer Till f	ORLANDO, FL 00000		3.4. CITY- 4.1 TITLE	01-71			Change	Addition
NAME			4. 2 NAME					_
STREET ADDRES	5			T ADDRESS				
City -St - ZiP			4.4 CITY-	1				
THEF		DELETE	5.1 TITLE	<u> </u>			Change	Addition
NAME			5.2 NAME		:			
STREET ADDRES	S		5.3 STREE	T ADDRESS				
CITY - ST - ZIP			5.4 CITY-	ST-ZIP			116	1 (100)
THLE		DELETE	6.1 TITLE				☐ Change	Addition
NAME		•	6.2 NAME	* 1000000				
STREET ADDRESS				T ADDRESS				
CITY-S1-ZIP	1		6.4 CITY-	91+4IF				

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 or an attachment with an address.

HUMRREN W WEBKER 4/21/97 407-293-3450

FILED

May 19 1997 8:00am

Secretary of State