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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F80579

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C.E.I. FLORIDA, INC.

FILED Feb 21 1997 8:00am Secretary of State

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Principal Place of Business Mailing Address 807 SQ, U.S. HWY, 17-92 807 SQ, U.S. HWY, 17-92 807 SQ, U.S. HWY, 17-92				e endiend tene anen maide ditt bates et	11 #1815 B1A() B	iåir BiEdt Bibit	#18/5 188 (
			!						
p. o. Box 160 Debary Fl 32		P. O. BOX 1600 DEBARY FL 32713-9739							
US US		US				3. Date Incorporated or Qualified	3a. Da	ate of Last R	teport
					05/10/1982 05/0			1/1996	
2. Principal F	Place of Business	2a. Mailing Address			,	4. FEI Number	L,3		oplied For
26		26			58-1474021			Not Applicable	
Suite, Apt.	Suite, Apt. #, etc.	te. Apt. #, etc.			5. Certificate of Status Desired			5 Additional	
		27				C. Commode of Grates Desired		Fee Re	equired
City & Stat	le	City & State	y & State		6. Election Campaign Financing	May Be			
<u> </u>	T. Const.	28		nin.		Trust Fund Contribution			to Fees
Zip	Country	Zip	Cou	nury		8. This corporation has liability to	r intangible Yes [. 199.032,
<u> </u>	25 9. Name and Address of Current	29 Registered Apent	30			Florida Statutes 10. Name and Address of New F			
1117		riogisterou Agent		81	Name	(O, Italia Bild Addies O, Harri	oğistolan .	-Marit	
	RTIN, RONALD H		į						
	S. U.S. HWY. 17-92			82 Street Add		ddress (P.O. Box Number is Not Acceptable)			
DEBARY FL 32713			-	83	ļ				
			Į						
			-	64	City		FL	85 Zip I	Code
1. Pursuant	to the provisions of Sections 607,0502 registered agent, or both, in the State of am familiar with, and accept the obligat	and 607 1508. Florida Statu	ites, the at	20V6	e-named corr	poration submits this statement for the		changing I	ts registered
IGNATURE	Signature Typed or printed name of registered agen		TE: Registered	i Age	ant signature requir	red when reinstaling) ADDITIONS/CHANGES TO OFF	DATE	- CIBEATAL	OC IN 12
2. Tlf	OFFICERS AND	DELETE	1.170	fi E		ADDITIONS/CHANGES TO OFF	CERS AND	Change	Addition
uVE	MARTIN, RONALD H	becere	1.2 NA		j			C Sugnity	LJ (Addition
REET ADDRESS	907 SO. U.S. HWY. 17-92				ADDRESS	•			
TY-ST-ZIP	DEBARY FL				ST-ZIP				
TLE	VS	DELETE	21 TII				***************************************	Change	Addition
AME	COOK, JOHN C		2.2 NA	ME					
TREET ADDRESS	907 S HWY 17-92		2.3 ST	REET	ADDRESS	·			
TY-ST-ZIP	DEBARY FL		2. 4 CI	TY-S	ST-ZIP				
TLE	D	☐ DELETE	3.1 Ti1	TLE				Change	Addition
AME	WILLIAMS, R JAMISON JR.		3.2 NA	ME					
TREET ADDRESS	525 WOODWARD AVE #1200		3.3 ST	REET	ADDRESS				
ITY-ST-ZIP	BRIGHTON MI	111			ST-ZIP			· · · · · · · · · · · · · · · · · · ·	
TLE	D	DELETE	4,1 TII			•		L Change	Addition
AME	COOK, GEORGE J		4, 2 N						
REET ADDRESS	,		1		ADDRESS				
ITY-ST-ZIP	HOWELL MI	Florier			ST-ZIP		··············	Chanas	L Addition
TLE		DELETE	5.1 111			·		Change	LLJ Addition
IME			5.2 NA						
TREET ADDRESS	†				ADDRESS				
TY-ST-ZIP		DELETE			ST-ZIP			☐ Change	☐ Addition
TLE		L.J DELETE	61 T/I					TH CARRIDO	
AME			6.2 NA		· ADDDCC				
REET AODRESS					ADDRESS				
ITY-ST-7/P			■ 6.4 Cl*	1Y - S	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 truebe 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 attach more with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/14/97

(407)668-0154

Daytime Prixie