FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

 1	9	9(	6	

	1990	ENVISION C		10145			
DOCUI 1. Corporation	MENT # F8865	55 (8)					
BUCHA	AN PUBLICATIONS, INC.						
					1 (20100 1101 18)61 (0112 0110) 0111	IE ALIE DIOLE ALGE OLORI	OLDII DIGII BIGII IBBI
		····					
Principal Place of Business Mailing Address				. in die Lift iftigt tillift fittigt fittigt fittigt	IN MILL MINNIN MINNIN MINNIN	AIEN EIBN AFAN INGI	
		1172-36TH AVENUE I	NE .				
ST PETERSB	URG FL 33704	ST PETERSBURG FL	33704				
					3. Date Incorporated or Qualified	3a. Date of La	st Report
					06/28/1982	07/05/	1995
	2. Principal Place of Business 2a. Mailing Address				4. FEI Number		Applied For
Suite Act i					59-2193653		Not Applicable
Suite, Apt. #, etc. Suite Apt. #, etc. 27				5. Certificate of Status Desired	11 7 -	.75 Additional ee Required	
City & State City & State				6. Election Campaign Financing			
23		28			Trust Fund Contribution		5.00 May Be dded to Fees
Zip	Country	Zφ	Countr	у	8. This corporation has liability for	· · · · · · · · · · · · · · · · · · ·	
24	25	29	30		Florida Statutes Yes		
	g. Name and Address of Curre	nt Hegistered Agent		Name	10. Name and Address of New I	Registered Agent	!
RUCHAN	I, RUSSELL		Ľ	Name			
	AVE. N.E.		8:	Street Add	iress (P.O. Box Number is Not Acceptal	ole)	
	ERSBURG FL 33704		8:	3			
•			84	1 '''		FL  85	Zip Code
11. Pursuant to or registere familiar with	o the provisions of Sections 607,050 ed agent, or both, in the State of Flor h, and accept the obligations of, Sec	2 and 607.1508, Florida Statu ida, Such change was authori tion 607.0505, Florida Statute	ites, the above ized by the cor is.	named corpo poration's boa	ration submits this statement for the purified of directors. I hereby accept the app	rpose of changing ointment as regist	its registered office ered agent I ani
SIGNATURE	· -						
	Signature typed or printed name of registered agric		OIL Registered Age	et sgrafine region		DATE	
12.	PST OFFICERS AN	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF		
NAME	BUCHAN, RUSSELL P.	[] otten	1.2 NAME			☐ Chai	nge 🔲 Addition
STREET ADDRESS	1172-36TH AVE. N.E.			LADDRESS			
CITY-ST-ZIF	ST. PETERSBURG FL		1 <b>4</b> CHY-				
TITLE	D	☐ DELETE	2 1 TITLE			Chai	nge
NAME	BUCHAN, RUSSELL P.		2.2 NAME	İ		_	, ,
STREET ADDRESS	1172 36TH AVENUE, N.E.		2.3 STREE	I ADORESS			
CITY - ST - ZIP	ST. PETERSBURG FL		2.4 CITY -	ST - ZIP			
TITLE		DELETE	3 1 THTLE			☐ Char	nge 🔲 Addition
NAME STREET ADDRESS			3.2 NAME				
STREET ADDRESS CHTY+ST+ZIP				T ADDRESS			
THLE		DELETE	4 1 TITLE	S! - 7IP		□ ^s	Addition
NAME			4.2 NAME			☐ Char	nge 🔲 Addition
STREET ADDFESS				LADDRESS			
DITY-ST-ZIP			4 4 CITY -		ر الرسان الور الرسان ياسان ياسان الرسان الور		
TITLE		☐ DELETE	5 1 TITLE		<b>4000018</b> : -05/14/96010		ige Addition
NAME			5.2 NAME		-05/14/96010 ***200.00	100UZB	_
STREET ADDRESS			5 3 STREE	T ADORESS	₮₮₮₤₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽₽		
CITY-ST-ZIP			5 4 CITY -	ST-ZIP	·		
TITLE		☐ DELETE	6 1 TIFLE			Char	ige 🔲 Addition
NAME STOCET ADDRESS			62 NAME				$\Sigma^{\nu}$ .
STREET ADDRESS				ADDRESS			-5.1
14. I do hereby	certify that the information supplied	with this filing is voluntarily fun	64 CITY - nished and doe	ST-ZIP	or the exemption stated in Section 119	07/3/(b) Florido C	oluton 16 dho
certify that	the information indicated on this ago	ual report or supplemental an	value of in the	or specing t	to and that my plant has been been all a	orgogia, monga St	acques, i runtrier

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, Fiorida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

Cussell Buchaw 4/2n/9/ 577-9171

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

526-9121