CORPO ANNUAL	DEFIT DRATION REPORT 97		ORIDA DEPART Sandra B. Secretary DIVISION OF CO	of State	-	06 19 retary		
	ENT # <b>F92000</b> TAL CORP. III	00027	0 (0)					
ncipal Place of E ) Clearwater Netonka MN 5	DRIVE	Mailing Ac P.O. BOX 5 MINNEAPOL		26		IDIEI ANTII OFTIK DIIII I	FRAN BRING HANN NOON	
		US			3. Date incorporated o 11/17/1992		Date of Last R	eport
Principa Place	of Business	2a, Mailing	Address		4. FEI Number		Ap	plied For
Suite, ApL #, et	Č.	26 Suite, A	Apt. #, etc.		41-1725287 5. Certificate of Status	Desired	\$8.75 A	t Applicable Additional
Oity & State		27 City & 1	State				Fee Re	
эну өгөзэнэ		28	Jiate		6. Election Campaign F Trust Fund Contribut	~ ~~~	\$5.00 Added 1	
Zip	Country 25	2ip 29	ŗ	Country 30	<ol> <li>This corporation has Florida Statutes</li> </ol>	liability for intang	· _	199.032,
9.	Name and Address of Currer				10. Name and Address			
	RPORATION SYSTEM			61 Name				
	OUTH PINE ISLAND ROAD TION FL 33324			82 Street A	ddress (P.O. Box Number is N	ot Acceptable)	<u>, , , , , , , , , , , , , , , , , , , </u>	
FLANIA	HON FE 33324			83				
Parsuant to the	e provisions of Sections 607.050	02 and 607.1508	, Florida Statute	64 City	corporation submits this statem			Code s registered
NATUHE	e provisions of Sections 607.050 tered agent, or both, in the State miliar with, and accept the oblig tore specie prove have diregetined age	ent and title if applicab		s, the above-named c ithorized by the corpo ida Statutes.	equired when reinstating)	ent for the purpo ereby accept the DA	E of changing it appointment as	s registerec registered
NATUHE Sour	rue lyped or protocil hank of registered agr OFFICERS AN		ie. (NOTE:	s, the above-named c thorized by the corpo ida Statutes. Registered Agent signature in 13.		ent for the purpo ereby accept the DA	E of changing it appointment as	s registered registered
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