FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE

APPROVED AND FILED
95 MAY -1 PM 2:19
SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # F94000005655 (5)

1. Corporate Name

LITE LIGHTS, INC.

Principal Place of Business: 10501 JUMPER LANE, CARMEL IN 46032

Mailing Address: 10501 JUMPER LANE, CARMEL IN 46032

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/01/1994
3a. Date of Last Report:

2. Principal Place of Business
2a. Mailing Address

4. FEI Number: 35-1934031 — Applied For / Not Applicable

5. Certificate of Status Desired [ ] — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] — $5.00 May Be Added to Fees

8. The corporation has liability for intangible tax under s. 199.032 Florida Statutes. [ ] Yes [ ] No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
WALKER, ADRON H 802 11TH ST. W. BRADENTON FL 34205	81 Name: 82 Street Address (P.O. Box Number is Not Acceptable): 83 84 City: FL 85 Zip Code:

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: *Carole Schmidt* DATE: 4/30/95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	CPST	[ ] Change [ ] Addition
NAME	SCHMIDT, CAROLE	
STREET ADDRESS	10501 JUMPER LANE	
CITY-ST-ZIP	CARMEL IN 46032	

14. I the undersigned 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 on an attachment with an address.

SIGNATURE: *Carole Schmidt* — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: *April 30, 1995* Daytime Phone: *317-844-1537*

Conversation with gentleman at Fla Dept. of State stating form fine

0476475 FP