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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

DIVISION OF CORPORATIONS F95000002462 (8) DOCUMENT #
1. Corporation Name

CID	CORPORATION	1
3.1.0.	CONFORATION	١



Principa! Plac	ce of Business	Mailing Address		*****		II OOKI OOKI GORID KOKO OOK	B BINING INDI KON
94 SHUBUTA STREET 94 SHUBUTA STR							
		JACKSON MS 3920	JACKSON MS 39209				
	//				3. Date Incorporated or Qualified 05/19/1995	3a. Date of Last Re	pport
2. Principal F	Place of Business	2a. Mailing Address 26			4. FEI Number 64-0758763	↓↓	Applied For Not Applicabl
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	□ \$8.75	Additional
City & Stat	te	City & State			6 Floatice Committee Fire	- Fee F	Required
3		28			6. Election Campaign Financing Trust Fund Contribution		May Be I to Fees
Zφ	Country	Ziρ	Cour	try	8. This corporation has liability for it		
<u> </u>	25	29	30		Florida Statutes	□No	
	9. Name and Address of Curr	rent Hegistered Agent		81 Name	10. Name and Address of New R	tegistered Agent	
C T C	ODDODATION OVETEN			31 Name			
	ORPORATION SYSTEM SOUTH PINE ISLAND ROAD		Ţ	Street Add	dress (P.O. Box Number is Not Acceptab	ile)	
	ATION FL 33324			ва ———			
			}	34 City		■ 85 Zip	Code
4 5	T		i	,	oration submits this statement for the pur		
	ith, and accept the obligations of, Se			gent signature require	ec when reins aling?	DATE	
ignature 2.	Signature, typed or printed name of registered ag	iont and title if applicable (N ND DIRECTORS		gent signaturu recyare	ec when reins along: ADDITIONS/CHANGES TO OFFI		3S IN 12
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oath; that I am an officer or director of the corporation or the properties and that I am an officer or director of the corporation or the properties and that I am an officer or director of the corporation or the properties as if made under appears in Block 12 or Block 13 if changed, or on an attactoring with an address.

SIGNATURE:

THE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR