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

PROFIT



FLORIDA DEPARTMENT OF STATE

CORPORATION • ANNUAL REPORT 1996				Sandra B Mortham Secretary of State DIVISION OF CORPORATIONS				
	OCUM Corporation N			731 (4)				
	1000 0	IIAN OF TADOURING	110.					
Prii	ncipal Place of	Business	Mailing	Address				
	120 INDUSTRIA			120 INDUSTRIAL DR SIKESTON MO 63801				
							3. Date Incorporated or Qualified 09/28/1995	3a. Date of Last Report
	Principal Place	e of Business	2a. Mail	ing Address			4. FEI Number	Applied For
21			26				61-0729139	Not Applicable \$8.75 Additional
1	Suite, Apt. #,	etc .	i	Suite, Apt. #, etc.			5. Certificate of Status Desired	Fee Required
22	City & Ctata			City & State			6. Election Campaign Financing	\$5.00 May Be
23	City & State		28	a disto			Trust Fund Contribution	Added to Fees
201	Zip	Country Z _I p			Country		8. This corporation has liability for	
24		25			30		Florida Statutes	S No
		9. Name and Address of Cu	urrent Registered	l Agent	81	Name	10. Name and Address of New	negistered Agent
	1200 SO	Poration System Uth Pine Island Road Ion FL 33324			8: 8:	3	ress (P.O. Box Number is Not Accepta	95 Zn Code
ļ								FL
SI	or registered familiar with IGNATURE	diagent, or both, in the State of , and accept the obligations of, graphs type, or programme of require	Section 607.0506	inge was authorized, Florida Statutes.	Try file co.	-named corpo poration's boa -ncsgrang regar	ica who per slate of	upose of changing its registered office pointment as registered agent. I am OALE FICERS AND DIRECTORS IN 12
12	Z. TLE	OFFICERS AND DIRECTORS PD DELET		DELETE	1 1 T TUE			Change Addition
N/	AME TREET ADDRESS	STOREY, KENNETH E 22 GREEN MEADOWS		I .		E1 ACORESS		
-	ity-ST-ZiP	ST-ZIP SIKESTON MO 63801		1 4 CITY - ST - ZIP DELETE 2 1 TITLE				Change Addition
N/	TLE Ame Treet adoress	WATKINS, RONNIE J 816 GLENN DR			2.2 NAM 2.3 STRE	ET AODRESS		
	ITY-ST-ZIP	SIKESTON MO 63801		E3 OCITY	2.4 C/TY 3.1 THL	- ST ZIP		Change Addition
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1	NAME				62 NAM 63 STM	AT EFT ADDRESS		
1 0	PERSONAL ADDRESS.				■ 0.3.31F	LET MUDDLESS I		

64 City St-Zip

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this annual report or suppliemental 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 trusted 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 an an attachment with an address SIGNATURE: SIGNATURE AND TYPED OH PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)