## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9600000414 (0)

## FILED Jan 28 1998 8:00am Secretary of State

	TORY AUDITORS, INCORP		• (0)				TOTAL PORT DIERLIEGE BIRK LOZI
Principal Plac	ce of Business	Mailing Addre	926				00214 00144 0400   1101   040   400
4301 BROADWAY 4301 BROADWAY							
DENVER CO 80216 DENVER CO 80216							
						DO NOT WRITE IN TH	IS SPACE
						3. Date Incorporated or Qualified 01/24/1996	
2. Principal F	Place of Business	2a. Mailing Address				4. FEI Number	Applied For
21		26				84-0765535	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional
22		27				a. Certificate of Statos Desired	Fee Required
City & Stat	le	City & Stato				6. Election Campaign Financing	\$5.00 May Be
23		28				Trust Fund Contribution	Added to Fees
Zip	Country	r	Zip Cou			8. This corporation owes or has paid the	
24 25 9, Name and Address of Current		29 29 Acon				Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent	
	T CORPORATION SYSTEM	ant Hegistered Agen		81	Name	10. Name and Address of New Registere	ed Agent
	00 <b>SOUTH PINE ISLAND</b> ROAD				IValle		
	ANTATION FL 33324				Street Add	Address (P.O. Box Number is Not Acceptable)	
,,,	MITATION I E 33324			83			
				65			
				84	City	-	85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607 1509 Fix	rida Clatula	e the above	named cor	poration submits this statement for the automated	
office or r	egistered agent, or both, in the Stat	e of Florida. Such ch	arige was a	uthorized by	the corpora	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	ppointment as registered
agent i a	ım familiar with, and accept the obliq	gations of, Section 60	77.0505, Floi	nda Statutes			
SIGNATURE	Signature, lyped or printed name of registered as	gen) and blin if applicable	(NOTE	Registered Age	ol senature requi	ired whon reinstating) DATE	
12.		ND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	PD	P+1.1/L		1.1 TITLE			Change Addition
NAME			i i				
STREET ADDRESS 4301 BROADWAY				1.3 STREET	ADDRESS		}
CITY-ST-ZIP	DENVER CO			1.4 CITY - ST	r - 71P		
TITLE			DELETE	2 1 TITEE			Change Addition
NAME	MCNAMARA, SUE		221				
STREET ADDRESS	ET ADDRESS 4301 BROADWAY		231		ADDRESS		
CITY-ST-ZIP	DENVER CO				T-ZiP	- '9	
TOTLE	NO DECETE		3.1 THIE			Change Addition	
NAME	MCNAMARA, ROBERT 4301 BROADWAY		3.2 NAME				
STREET ADDRESS	DENNED CO			3.3 STREET A	ADDRESS		
CITY-ST-ZIP			34 CITY-S	I - ZiP			
TITLE	MCNAMARA, JOHN	OELETE DELETE		4.1 TITLE			Change Addition
NAME CYDEST ADDRESS	4301 BROADWAY			4 2 NAME			
STREET ADDRESS	DENVER CO			4.3 STREET /			
CITY-ST-ZIP TITLE	VD		DELFT <b>E</b>	4.4 CITY - ST	- ZIP		
NAME	MCNAMARA, THOMAS	البا	or at the	5.1 TITLE			L Change L Addition
STREET ADDRESS	4301 BROADWAY		5.2 NAME				
	DENVER CO		5.3 STREET ADDRESS				
CITY-ST-ZIP TITLE			DELETE	5.4 CITY - ST 6.1 THLE	- th,		Change Addition
NAME		L		6.2 NAME			Change Addition
STREET ADDRESS					nnorce		
CITY-ST-ZIP				6.3 STREET A			
	artifuthat the information supplied a	with this Olion do	t annalite de	6.4 CITY-SI	- ZIP	0-1	

14. I hereby 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.

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John Manage

1 4 00 (20)

CR2E034 (10/97)