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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

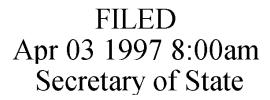
DOCUMENT # F9600002900 (6)

PRIORITY ONE AMERICA, INC.

Principal Place of Business

Mailing Address

1749 NORTHGATE BLVD. SARASOTA FL 34234 1749 NORTHGATE BLVD. SARASOTA FL 34234-2138





3. Date Incorporated or Qualified 3a. Date of Last Report

3/26/97

941/355-6766 Daytime Phone # 0426242

								06/11/1996	ì			
) · · · · · · · · · · · · · · · · · · ·					2a, Mailing Address			4. FEI Number		Ap	plied For	
1678 Independence Blvd.				26	1678 Independ	dence	Blvd.	68-0317050		No	t Applicable	
Suite, Apt. # etc.				Suite, Apt. #, etc.			E Contilinate of Status Desired		\$8.75	Additional		
22				27				6. Certificate of Status Desired	Li	Fee Re	quired	
City & State					City & State			6. Election Campaign Financing		\$5.00	May Be	
23	Saras	ota, F	<u>L</u>	28	Sarasota, FL			Trust Fund Contribution		Added 1		
Zış	þ		Country		Zip	Country		8. This corporation has liability fo	r intangible	tax under s	199.032,	
24 3	34234	-2103	25	29	34234-2103 3	ol			Yes [
9, Name and Address of Current Registered Agent								10. Name and Address of New Registered Agent				
CUNNINGHAM, COLIN 8												
1740 MONTHOATE BUSO							82 Street Address (P.O. Box Number is Not Acceptable)					
SARASOTA FL 34234							1678 Independence Blvd.					
83												
}						84	City			ler Zin /	Code	
						64	Saras:	ota.	FL		234	
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 Signature, typerd or partial name of registered agent and too it applicable (NOTE: Registered Agent signature required when reinstaling) DATE												
12.			OFFICERS AN	DIREC	CTORS	13.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFF	CERS AND	DIRECTOR	S IN 12	
THLE]	DPST			DELETE	1.1 TITLE				X Change	Addition	
NAME		CUNNIN	GHAM, COLIN			1.2 NAME		Colin Cunningham				
STREET	ADORESS	1749 NO	RTHGATE BLVD.			1.3 STREET	ADDRESS	1678 Independence B1	vd.		[
CITY-S	1 - Z:P	SARASO	TA FL 34234			1.4 CITY - S	T-ZIP	Sarasota, FL 34234-2			ľ	
TITLE	- <u>-</u>				DELETE	2.1 TITLE	: = ;			Change	Addition	
NAME	{					2.2 NAME					[
(AODRESS					2.3 STREET	ADDRESS					
CITY-S	· · · J					2. 4 CITY-5					{	
HILL					DELETE	3.1 TITLE			·······	Change	Addition	
NAME						3 2 NAME						
}	ADDRESS					3.3 STREET	ADDRESS				,	
						3.4. CITY-1					-	
DILE	11 - Z H				DELETE	4.1 TITLE	21-411			Change	Addition	
NAME	İ					4. 2 NAME						
ł	AMORECE					4.2 NAME	AUDDESS				{	
	ADDRESS										ļ	
CHY-S	st - ZIP				DELETE	4.4 CITY - S 5.1 TITLE	1-211	······································		Change	Addition	
HILE	ļ				F" DECEIL	•	1			- Or Milds	T Vanitor:	
NAME						5.2 NAME)	
	ACIDRESS					5.3 STREET					ļ	
CITY-S	3 - 200		p		Toplett	54 CITY-S	T-ZIP			Observe	T A ANDRES	
mili	ł				DELETE	6.1 TITLE	1			☐ Change	Addition	
NAMÉ	j					6.2 NAME					ļ	
STREET	ADDRESS					6.3 STREET	ADDRESS					
CITY S						6.4 CITY - S						
14.	do herel	by certify the	at the information supplied	d with thurnder	nis filing does not qualify lental annual report is true	for the exe	mption state	ed in Section 119.07(3)(i), Florida Statu at my signature shall have the same ler	tes. I further nat effect as	r certify that	the deripath: that !	
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 in the receiver policities amovered to execute this report as required by Chapter 607, Florida Statutes; and that my name appraise in filter 13 or Blook 13 if plantager or give 14 or give 13 or Blook 13 if plantager or give 14 or											name	