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 # F96000006566 (1)

INTERKEM OF OHIO, INC.

Principal Place of Business

Mailing Address

1581 WILLOW BROOK DR. PALM HARBOR FL \$4683 1581 WILLOW BROOK DR. PALM HARBOR FL 34683-2143

FILED Sep 11 1997 8:00am Secretary of State



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

2. Mailing Address 2. Mailing Address 3. Mailin	•					12/16/1996		
Suite, Apt. 4, etc.							Apı	plied For
City & State Ci	21 26					34-1006436	Not	Applicable
City & State City						Certificate of Status Desired	1 1	
Zip Country Zip Country Zip Country Trust Fund Contribution						S. Commeate of Status Desired	Fee Rer	quired
Zip						6. Election Campaign Financing	\$5.00	May Be
28	23				Trust Fund Contribution			
SWAN, ROBERT H 1581 WILLOW BROOK DR. PALM HARBOR FL 34683 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 registed agont, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as regist agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE SIGNATURE OFFICER'S AND DIRECTORS 12. OFFICER'S AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TILLE SWAN, ROBERT H 12 NAME SWAN, ROBERT H 13 SIREF ADDRESS 1581 WILLOW BROOK DR. 13 SIREF ADDRESS 1581 WILLOW BROOK DR. 22 NAME SWAN, BONNIE J 22 NAME SWAN, BONNIE J 23 SIREF ADDRESS 1581 WILLOW BROOK DR. 24 ADTY-SI-ZIP TITLE DELETE DELETE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TILLE Change Chang	Zip	Country	Zip	Country	<i>'</i>			199.032,
SWAN, ROBERT H 1581 WILLOW BROOK DR. PALM HARBOR FL 34683 80 64 City FL 85 Zip Code 67 City FL 85 Zip Code 67 City FL 86 Size and Address (P.O. Box Number is Not Acceptable) 87 Street Address (P.O. Box Number is Not Acceptable) 88 Size and Address (P.O. Box Number is Not Acceptable) 89 Street Address (P.O. Box Number is Not Acceptable) 80 Size and Address (P.O. Box Number is Not Acceptable) 81 Size and Address (P.O. Box Number is Not Acceptable) 82 Street Address (P.O. Box Number is Not Acceptable) 83 Size and Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 85 Size and Address (P.O. Box Number is Not Acceptable) 85 Size and Address (P.O. Box Number is Not Acceptable) 86 Size and Address (P.O. Box Number is Not Acceptable) 87 Size and Address (P.O. Box Number is Not Acceptable) 88 Size and Address (P.O. Box Number is Not Acceptable) 89 Size and Address (P.O. Box Number is Not Acceptable) 80 Size and Address (P.O. Box Number is Not Acceptable) 81 Size and Address (P.O. Box Number is Not Acceptable) 82 Street Address (P.O. Box Number is Not Acceptable) 83 Size and Address (P.O. Box Number is Not Acceptable) 84 City 85 Size and Address (P.O. Box Number is Not Acceptable) 86 City 86 City 87 Size and Address (P.O. Box Number is Not Acceptable) 88 Size and Address (P.O. Box Number is Not Acceptable) 89 Size and Address (P.O. Box Number is Not Acceptable) 80 Size and Address (P.O. Box Number is Not Acceptable) 80 Size and Address (P.O. Box Number is Not Acceptable) 81 Size and Address (P.O. Box Number is Not Acceptable) 82 Size and Address (P.O. Box Number is Not Acceptable) 84 City 85 Size and Address (P.O. Box Number is Not Acceptable) 86 Size and Address (P.O. Box Number is Not Acceptable) 87 Size and Address (P.O. Box Number is Not Acceptable) 88 Size and Address (P.O. Box Number is Not Acceptable) 89 Size and Address (P.O. Box Number is Not Acceptable) 80 Size and Address (P.O. Box Number is Not Acceptable) 80 Size and Address (P.O. Box Number is	24							
STRET ADDRESS CITY-ST-ZP PALM HARBOR FL 34683 82 Street Address (P.O. Box Number is Not Acceptable) 83 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN THE STREET ADDRESS CITY-ST-ZP PALM HARBOR FL 34683 84 City FL 85 Zip Code City FL 86 Size Address (P.O. Box Number is Not Acceptable) 86 City FL 86 Size Address (P.O. Box Number is Not Acceptable) 87 Address (P.O. Box Number is Not Acceptable) 88 Address (P.O. Box Number is Not Acceptable) 89 Address (P.O. Box Number is Not Acceptable) 89 Address (P.O. Box Number is Not Acceptable) 80 Address (P.O. Box Number is Not Acceptable) 81 Address (P.O. Box Number is Not Acceptable) 82 Zip Code 84 City FL 85 Address (P.O. Box Number is Not Acceptable) 85 Address (P.O. Box Number is Not Acceptable) 86 Address (P.O. Box Number is Not Acceptable) 86 Address (P.O. Box Number is Not Acceptable) 87 Address (P.O. Box Number is Not Acceptable) 87 Address (P.O. Box Number is Not Acceptable) 87 Address (P.O. Box Number is Not Acceptable) 88 Address (P.O. Box Number is Not Acceptable) 89 Address (P.O. Box Number is Not Acceptable) 89 Address (P.O. Box Number is Not Acceptable) 89 Address (P.O. Box Number is Not Acceptable) 80 Address (P.O. Box Number is Not Acceptable) 80 Address (P.O. Box Number is Not Acceptable) 80 Address (P.O. Box Number is Not Acceptable) 81 Address (P.O. Box Number is Not Acceptable) 81 Address (P.O. Box Number is Not Acceptable) 82 Address (P.O. Box Number is Not Acceptable) 83 Address (P.O. Box Number is Not Acceptable) 84 Address (P.O. Box Number is Not Acceptable) 85 Address (P.O. Box Number is Not Acceptable) 85 Address (P.O. Box Number is Not Acceptable) 86 Address (P.O. Box Number is Not Acceptable) 87 Address (P.O. Box Number is Not Acceptable) 87 Address (P.O. Box Numbe		9. Name and Address of Curre	nt Registered Agent		· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Reg	Istered Agent	
PALM HARBOR FL 34683 83 84 85 87 88 88 88 88 88 88 88 88					81 Name			
PALM HARBOR FL 34683 83 84	1581 WILLOW BROOK DR.				82 Street Address (P.O. Box Number is Not Acceptable)			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its regist office or registered agent, or both, in the State of Fiorida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as regist agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes SIGNATURE SI								
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 agent. I am familiar with, and accept the obligations of. Section 607.0505, Florida Statutes. SIGNATURE Signature Image: Property Im					83			
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 agent. I am familiar with, and accept the obligations of. Section 607.0505, Florida Statutes. SIGNATURE Signature Image: Property Im				ايما	63			
office or registered agont, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as regist agent. I am familiar with, and accept the obligations of, Social Gov. Os. Sp. Florida Statutes Signature								
Agent. I am familiar with, and accept the obligations of. Section 607.0505, Florida Statutes. Signature Signature typed or printed name of registered agent and time if appt cable PROTE. Registered Agent signature requited when reinstating) DATE	office or r	registered agent, or both, in the State	te of Florida. Such change was a	authorized by	the corporat	oration submits this statement for the pu- ion's board of directors. I hereby accept	rpose of changing its the appointment as r	registered registered
Signature typed or printed name of registered agent and liter in applicable (NOTE: Registered Agent signature required when reinstate(g) DATE	agent. I a	am fa mi liar with, and accept the oblig	gations of, Section 607.0505, Flo	orida Statutes	S		, ,	9
12. OFFICERS AND DIRECTORS TITLE CPST SWAN, ROBERT H SWAN, ROBERT H STREET ADDRESS CITY-S1-ZIP NAME SWAN, BONNIE J STREET ADDRESS CITY-S1-ZIP NAME SWAN, BONNIE J STREET ADDRESS CITY-S1-ZIP TITLE DV DELETE 21 TITLE Change CITY-S1-ZIP TITLE DELETE 31 TITLE AMME 32 NAME 33 STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE DELETE 31 TITLE ALCITY-S1-ZIP TITLE ALCITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE ALCITY-S1-ZIP ALCITY-S1-ZIP TITLE ALCITY-S1-ZIP ALCITY-S1-ZIP TITLE ALCITY-S1-ZIP ALCITY-S1-ZIP TITLE ALCITY-S1-ZIP ALCITY-S1-ZIP ALCITY-S1-ZIP TITLE ALCITY-S1-ZIP	SIGNATURE							
DELETE DELETE 11 TITLE Change Amme SWAN, ROBERT H 12 NAME 1581 WILLOW BROOK DR. 13 STREET ADDRESS CITY-S1-ZIP DELETE DELETE 21 TITLE Change Amme					ent signature require		····	
NAME SWAN, ROBERT H 1.2 NAME 1.3 STREET ADDRESS 1581 WILLOW BROOK DR. 1.3 STREET ADDRESS 1.4 CITY-51-2IP						ADDITIONS/CHANGES TO OFFICE		Addition
1381REET ADDRESS			☐ DECE+E	1			□ Change	L Addition
DELETE PALM HARBOR FL 34683 1.4 CITY-ST-ZIP TITLE				1	ļ			
TITLE DV DELETE 21 TITLE Change AME SWAN, BONNIE J 22 NAME STREET ADDRESS 1581 WILLOW BROOK DR. 23 STREET ADDRESS CITY-ST-ZIP PALM HARBOR FL 34883 2.4 CITY-ST-ZIP TITLE STREET ADDRESS 31 TITLE Change STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE DELETE 41 TITLE Change MAME STREET ADDRESS 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.1 TITLE Change MAME STREET ADDRESS 4.4 CITY-ST-ZIP TITLE STREET ADDRESS 4.4 CITY-ST-ZIP TITLE ANAME 4.2 NAME STREET ADDRESS 4.4 CITY-ST-ZIP TITLE STREET ADDRESS 4.4 CITY-ST-ZIP	STREET ADDRESS			1.3 STREET	ADDRESS			
NAME SWAN, BONNIE J					ST - ZIP			
STREET ADDRESS 1581 WILLOW BROOK DR. 23 STREET ADDRESS 2.4 CITY-ST-ZIP			☐ DELETE	2.1 TITLE	Į		L Change	Addition
CITY-ST-ZIP	NAME			2.2 NAME	i			
TITLE	STREET ADDRESS			23 STREET	ADDRESS			
NAME 3 2 NAME STREET ADDRESS 3 3 STAEET ADDRESS CITY-ST-ZIP 3 4 CITY-ST-ZIP TITLE DELETE 4 1 TITLE Change NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY ST-ZIP	CITY-ST-ZIP	PALM HARBOR FL 34683		2. 4 CITY - 5	ST-ZIP			
STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change 7.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY ST-ZIP	TITLE		DELETE	3.1 TITLE	-		☐ Change	Addition
	NAME			3.2 NAME	-	÷		
TITLE	STREET ADDRESS	}		3.3 STREET	ADDRESS			
TITLE DELETE 4.1 TITLE Change Aname NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-S1-ZIP 4.4 CITY S1-ZIP	CITY-ST-ZIP	<u></u>		3.4. CITY - S	ST-ZIP_			
STREET ADDRESS 4.3 STREET ADDRESS CITY-S1-ZIP 4.4 CITY S1-ZIP	TITLE		DELETE	4.1 TITLE			Change	Add tion
CITY-ST-ZIP 4.4 CITY ST-ZIP	NAME			4. 2 NAME			•	
CITY-S1-ZIP 4.4 CITY S1-ZIP	STREET ADDRESS	}		4.3 STREET	ADDRESS			
			•	4.4 CITYLS	it-ZIP			
		<u> </u>	DELETE				Change	Addition
NAME 5.2 NAM	· ·						•	
STREET ADDRESS 5.3 STREET ADDRESS		1			ADDRESS			
		1						
		 	I DELETE		1 - KIF		Channe	Addition
			bear				The Cutanibe	- HODRIGH
		j			Lenner of			
STREET ADDRESS 6.3 ST ADDRESS		1			1 1			
CITY-S1-ZIP 6.4 CITY-ZIP			- 1 - 00 - 00 - 700 - 1			40.02/02/02	77 11 7 10 11 11	
14. I do hereby certify that the information supplied with this filing does not qualify for the information indicated on this annual report or supplemental annual report is true and a rate and that my signature shall have the same legal effect as if made under oa lam an officer or director of the corporation or the receiver or trustee empowered to the late this report as required by Chapter 607, Florida Statutes; and that my name	informatio	on indicated on this annual report or	supplemental annual report is t	true and a	rate and that	my signature shall have the same legal.	effect as if made und	er oath; that