COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

OCUMENT #

FILED Sep 07, 1999 8:00 am Secretary of State

09-07-1999 90001 007 ***550.00

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Pursuant to the provisions of sections 607 0502 and 607 1508. Flonds 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 obligations of, section 607 0505. Floridad Statutes. NATURE Signature, typed or privated name of registered agent and the if applicable (NOTE Registered Agent signature required when relatating) PD					82 S	Street Addre	ess (P.O. Box Number is Not Acceptable)				\dashv
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		ertify that the information supplied wi	ith this filing does not qualify fo				on 119.07(3)(i), Florida Statutes. I further certify	that the	nforma	tion	7

ndicated 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 cath; that I am n 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 a Block 12 or Block 13 if changed, or on an attachment with an address.

Servera A. WILSON 8-31-99