

PROFIT CORPORATION ANNUAL REPORT 1997
FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jun 01 1998 8:00am
Secretary of State

DOCUMENT # F97000003556
1. Corporation Name

Principal Place of Business	Mailing Address

c/o Waldman & Co., 855 Ave. of the Americas Rm 623
New York, NY 10001

3. Date Incorporated or Qualified 01/01/97	3a. Date of Last Report
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2. Principal Place of Business		2a. Mailing Address	
21	134 Water Street Suite, Apt. #, etc.	26	c/o Waldman & Co. Suite, Apt. #, etc.

4. FEI Number			
13-3849401		Applied For	
		Not Applicable	

22	City & State	27	855 Ave of the Americas	City & State
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5. Certificate of Status Desired ☒ **\$8.75** Additional Fee Required

23	Allegan, Michigan		28	New York, NY	
	Zip	Country		Zip	Country

6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>	\$5.00 May Be Added to Fees
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24	49010	25		29	10001	30	
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8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Tony Anderson
7529 Sunshine Skyway
Suite 211
St. Petersburg, Fl. 33711

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	
TITLE	President/Director STEVEN KILL <input type="checkbox"/> DELETE
NAME	7409 Fairfax Road
STREET ADDRESS	Bethesda, Md. 20814
CITY, ST. ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY, ST, ZIP	

TITLE	Gwendolyn Grace, <i>Director</i>	<input type="checkbox"/> DELETE
NAME	705 Hawk Hill Road	
STREET ADDRESS	Scotts Valley, Ca. 95066	
CITY - ST - ZIP		

2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY, ST, ZIP	

CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	

TITLE	DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

4.1 TITLE	<input type="checkbox"/>	Change	<input type="checkbox"/>	Addition
4.2 NAME				
4.3 STREET ADDRESS				
4.4 CITY - ST - ZIP				

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

5.1 TITLE	800002543752	Change	<input type="checkbox"/>	Addition
5.2 NAME	-06/02/98--01006--030			
5.3 STREET ADDRESS	***158 75			
5.4 CITY - ST - ZIP				

CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

6.1 TITLE	Change	<input type="checkbox"/>	Addition
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY - ST - ZIP			

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, and 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.

SIGNATURE: Steven Tully STEVEN TULLY 5/1/98 901 788 8253
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

05/01/98 09:44 AM