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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G08695

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## FILED May 05 1997 8:00am Secretary of State

Principal Plac 25.400 U.S. 19 SUITE NO. 193 CLEARWATER	NORTH 3	Mailing Address 25.400 U.S. 19 NORTH SUITE NO. 193 CLEARWATER FL 34623-21	75	<u></u>		Incorporated or Qualif		ate of Las	
					- ·	7/1982	1	01/1996	•
2. Principal F	lace of Business	2a, Mailing Address			4, FEIN		1 001		Applied For
21		26			59	2233442			Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Certi	licate of Status Desired			5 Additional Required
City & Stat 23	е	City & State				ion Campaign Financin Fund Contribution	ت ور		May Be
Z(p)	Country 25	Zip <b>29</b>	Country 30			corporation has liability la Statutes	for intangible		r s. 199.032,
	9. Name and Address of Curre	nt Registered Agent			10. Nam	e and Address of Nev	w Registered	Ágent	
SILV	/ERMAN, MARC A.B., ESQ.		81	Name					
	5 S BELCHER ROAD ARWATER FL 33516				Address (P.O. B	ox Number is Not Acce	eptable)		
			83 64	City			<del></del>	<b>85</b> Z	ip Code
		<b>V</b> 7	Only.			FL	. 85 -	<b>1</b> 4000	
agent 1 a	to the provisions of Sections 607.050 registered agent, or both, in the State are familiar with, and accept the oblig	02 and 607.1508, Florida Statute e of Florida. Such change was a gations of, Section 607.0505, Flo	es, the above julhorized by wida Statutes	e-named of the corps.	corporation sub poration's board	mits this statement for of directors. I hereby a		f changing pointment	g its registered as registered
11. Pursuant office or ragent 1 a SIGNATURE.  12. THEE NAME	Signature, typed or printed name of registered ag  OFFICERS AN	gations of, Section 607.0505, Flo	vida Statutes	8.	required when reinstal ADDIT	IONS/CHANGES TO C	the purpose of accept the appropriate DATE	~	ORS IN 12
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1. If 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. I further certify that the information indicated on this annual report or supplied ental 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 effective 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, of on attachment with an address.

SIGNATURE: Signature and type of Printed Name of Signing Officer or Director