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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

	JAL REPORT		Secreta	Secretary of State DIVISION OF CORPORATIONS		Secretary of State		
DOCUI	MENT # G2	4690 ANY, INC.	(1)		A - WAN - a	1 HARIDH ARID HAN RICHE ANNA 160N CAN	BIBH BIĞII İMBIL GIĞI BIBIL G	<b>3</b> 11 (88)
Principal Plac	e of Business	Madi	ng Address					
% THOMAS A. BENTON 15881 SW 254 ST HOMESTEAD FL 33031		% TH 15881	% THOMAS A. BENTON 15881 SW 254 ST HOMESTEAD FL 33031-2043					
TOMEGICADI	. ••••	, ioni		.,,•		3. Date Incorporated or Qualified 02/18/1983	3a. Date of Last Rep 06/25/1996	port
	iace of Business	2a. №	lailing Address			4. FEI Number 59-2372661	App	olied For Applicable
Suite, Apt	#, etc	s	uite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Ac	dditional
City & Start	, Ĉ	27	ity & State	,		6. Election Campaign Financing	Fee Req \$5.00 N	May Be
<b>23</b> ] Ζιρ	Country	<b>28</b>	ib	Count	ry	Trust Fund Contribution  8. This corporation has liability for	Added to intangible tax under s.	
24	25 9, Name and Addres	29 29 Current Register	red Agent	30		Florida Statutes  10. Name and Address of New Re	Yes No	
REN	TON, THOMAS A.	3 Or Our ent Hogister	oo Agent	8	1 Name	10, Halife did Address of Hor He	Aleteton Main	
	81 SW 254 ST			8	2 Street Add	ress (P.O. Box Number is Not Acceptate	ole)	
HOM	MESTEAD FL 33031				13			
				8	4 City		FL 85 Zip Ci	ode
office or r	registered agent, or both, imitamiliar with land acco	in the State of Florida pt the obligations of, \$	Such change was Section 607,0505, F	authorized l lorida Statut	by the corpora les.	poration submits this statement for the p tion's board of directors. I hereby acce	ot the appointment as re	registered egistered
12.	Signature, type dior pented name of OF	of registered agent and little if a FICERS AND DIRECT		TE: Registered A	igent signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIRECTORS	IN 12
TITLE	DS		DELETE	1.1 TITU			☐ Change	Addition
NAME	BENTON, RACHEL			1.2 NAM	E			
STREET ADDRESS	15881 SW 254 ST	204			ET ADDRESS			
CITY-ST-ZIP TITLE	HOMESTEAD FL 330	NI	DELETE	1.4 CITY 2.1 TITLE			Change	Addition
NAME	BENTON, THOMAS	A.		2.2 NAM	1		_ •	
STREET ADDRESS	15881 SW 254 ST			2.3 STRE	EFT ADDRESS			
CHY-ST-ZIP	HOMESTEAD FL 330	031	Doc. syr		/-ST-ZIP			1 1 1 1 2 2 2 2 2 2
TOTALE			L_] DELETE	3 1 TITLE 32 NAM			L Change	Addition
NAME STREET ADDRESS					ET ADDRESS			
C TY - ST - 71P				1	7-\$1-ZIP			
TIFLE		M. 141	DELETE	4.1 TiTLE			☐ Change	Addition
NAME:				4. 2 NAN	i			
STREEL ADDRESS					ET ADDRESS			
COY-SE-7IF TILLE		**************************************	DELETE	4.4 CHY	-ST-ZIP		☐ Change	Addition
NAME				5.2 NAM			_ <del>_</del>	
STREET ADDRESS				53STRE	EET ADORESS			
CITY - ST - ZIF					-ST-ZIP			
THE			DELETE	6.1 7171.8	ì		L. Change	Addition
NAME DIDECT ADDRESS				6.2 NAM				
STREET ADDRESS  CITY+ST-ZIP					ET ADDRESS - ST-ZIP			
14. Ldo here	I	tion supplied with this	filing does not qua	lify for the e	xemption state	d in Section 119.07(3)(i), Florida Statute	s. I further certify that the	né
informatic Laru an c	an indicated on this annua	al report or supplement progration or the receiv	ital annual report is ver or trustee empo	true and ac wered to ex	curate and tha	it my signature shall have the same lega irt as required by Chapter 607, Florida S	al effect as if made unde	er oath; that I

**FILED** 

Mar 06 1997 8:00am