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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # CARO

101

## **FILED** May 15 1997 8:00am Secretary of State

TWICE AS NICE CONSIGNMENT BO  Principal Place of Business  180 MCLEOD STREET MERRITT ISLAND FL 32863				Mailing Address  160 MCLEOD STREET MERRITT ISLAND FL 3285-3466									
								-	3. Date Incorpor 07/12/1985			Date of Last 7/31/1996	
2. Principal F	Surle, Apt. #, elc			Mailing Add	dress	···			4. FEI Number				Applied For
21				26 Suite, Apt. #. etc.								Not Applicable	
22 Suite, Apt								·	5. Certificate of S	Status Desired		<b>—</b> — · · · —	Additional Required
Cily & Sta	f(:		28	City & State	0	***************************************			6. Election Camp Trust Fund Co				O May Be d to Fees
Zip		Country		Zip		Countr	у	1	8. This corporati				s. 199.032
24	25	Address of Cu	29	lared Anani		30			Florida Statute 10. Name and Ad		Yes		
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145	5 N. GROVE ST	REET				82	Street	Addres	s (P.O. Box Numb	er is Not Accept	table)		
	RRITT ISLAND						<u> </u>		:				
						83	9						
						1-1	1					. 85 Zij	o Code
11. Pursuan	to the provisions	of Sections 607	.0502 and 60	07.1508, Fla	rida Statute	es, the above	1 '	corpor	ation submits this	statement for the	e purpose	<b>L</b>     '	its registered
SIGNATURE	Karen.	n. Nuce	ed agent and tille	COSCA, if applicable.	UN NO	es, the above authorized borida Statute Colorida Statute	ve-named by the cor PD		ation submits this n's board of directon when reinslating)	A	e purpose cept the a pril	of changing ppointment a	7
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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, 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 efficient or direction of the conjugation 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: ROSCALLE ROSCALLO WICOL PD April 2697