## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUN 1. Corporation	MENT # G612	238 (3)					
·	N FOLIAGE, INC.	, ,			E (GERTIN COLO DISCE MONE DARRE MARIENEN CUERT D	I GIO GIĐI: GLĀL: GLĀLI GLĀLI LAGS.	
Principal Pace	of Business	Mailing Address		<del></del>			
% DONALD H. GEIGER		-	% DONALD H. GEIGER				
5101 GEIGER CEMETARY RD ZEPHYRHILLS FL 33541		5101 GEIGER CEMETA	5101 GEIGER CEMETARY RD ZEPHYRHILLS FL 33541				
acr ************************************	72 0001	ZEFIIIMINECO FE GAZA	1			te of Last Report 06/27/1995	
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4. FEI Number	Applied For	
21		26	<u> </u>		59-2390325	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	27)		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred	
City & State		City & Stale	City & Stale		6. Election Campaign Financing	\$5.00 May Be	
23 Z <sub>S</sub>	Counts	28	1 0		Trust Fund Contribution	Added to Fees	
24	<u> </u>		Country 30		8. This corporation has liability for intangible Florida Statutes Yes No	tax under s. 199.032,	
Name and Address of Current Registered Agent					10. Name and Address of New Registered	3 Agent	
05,050	D01141D 11		81	Name			
	Donald, H Eiger Cemetary RD		82	Street Addr	ess (P.O. Box Number is Not Acceptable)		
	HILLS FL 33541		83				
			84	City		85 Zip Code	
11 Discount to the previous of Castings CO7 0500 and CO7 4500 Decide Cut the			an the shave s	,	propretion submits this statement for the purpose of changing its registered office		
or registere	ed agent, or both, in the State of F h, and accept the obligations of, S	lorida. Such chance was authoriz	ed by the corp	amed corpor oration's boar	ration submits this statement for the purpose of cl rd of directors. I hereby accept the appointment a	nanging its registered office is registered agent. I am	
SIGNATURE	n, and ascept the dongations of, e	section 607.0000, Florida Statutes	<b>)</b> ,				
	Signatine, typed or profesionance of registered a		TE: Rogistered Agen	it signature required			
12.	OFFICERS PD	AND DIRECTORS	RS <b>13.</b> DELETE 1.17//LE		ADDITIONS/CHANGES TO OFFICERS AN		
NAME	OCIOCO DOLLAD II		1. 1 1/1LE 1.2 NAME			Change Addition	
STHEEL ADDRESS 5101 GEIGER CEMETARY RD		RD	1.3 STREET ADDRESS				
CHY-ST ZIP	ZEPHYRHILLS FL	-	1.4 CITY - S				
31115			2 1 HILE			Change Addition	
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREET	ADDRESS			
CHY-SI ZiF			2 4 CITY - S	I - 21P			
TITLE	☐ DELE		3. 1 TITLE			Change Addition	
NAME STREET ADORESS			3.2 NAME 3.3 STREET	ADDRESS			
CITY - ST - ZIP			3.4 CITY - S				
101LE			4. 1 TITLE	1-40		Change Addition	
NAME			4.2 NAME				
\$1REEL ADDRESS			4.3 STREET	ADDRESS		•	
CITY-ST-ZIF		300	4.4 CITY - S	T - ZIP			
THLE		☐ DELETE	5. 1 TITLE			☐ Change ☐ Addition	
NAME			52 NAME				
STREET ACCIAESS			5.3 STREET				
CITY-S1-ZIP		DELETE	5.4 CITY- S	T-ZIP		Change C 44455-	
TITLE NAME		[1] pectig	6. 1 TITLE 6.2 NAME			Change Addition	
STREET ADDRESS			6.2 NAME	ADDRESS			
CITY-ST-ZIF			6.4 CITY - S				
14. Edo hereby	y certify that the information suppli	ed with this filing is voluntarily furn	ished and doe	s not qualify for	or the exemption stated in Section 119.07(3)(k), F	torida Statutes. I further	
certify that	the information indicated on this a	innual renort or supplemental and	ual report is tru	ie and accura	ite and that my signature shall have the same lega s report as required by Chapter 607, Florida Statu	al affact as if made under	

SIGNATURE:

DONALD HGEIGER 2-19-94 782-5492
DONALD HGEIGER DE DESCRIPTION DE D