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

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DOCUN I. Corporation to TAYLOR		(1)						
Principal Place of Business Mailing Address					- 3 (DAILLI OBIO THEO ILDII GIVIB HUA			1011 01011 (00)
1060 W. 10TH ST. RIVIERA BEACH FL 33404		1080 W. 10TH ST. Riviera Beach Fl 33404						
					3. Date Incorporated or Qualified 09/12/1983		of Last Re 1/26/199	
2. Principal Plac	ce of Business	2a. Mailing Address			4. FEI Number			pplied For
		26			65-0007591			Additional
Suite, Apt. #,	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Required
City & State		City & State			6. Election Campaign Financing		\$5.00	May Be
Oity a State		28			Trust Fund Contribution		Added	to Fees
Zip	Country	Zip	Country	,	8. This corporation has liability for	r intangible ta s M No	ax under s	199.032,
<u> </u>	25	29	30		Florida Statutes Ye 10. Name and Address of New		Agent	
	9. Name and Address of Current	i Hegistered Agent	81	Name	10. Name and Addition of their			
TAVI OD LICADV A					(D.O. Day Marker in Not Accord	ablo)		 .
Taylor, Henry A. 3600 avenue "T"			82	Street Addr	ess (P.O. Box Number is Not Accepta	iDie)		
	BEACH FL		83					
14716-41			84	City			85 Zıp	Code
	o the provisions of Sections 607.0502		'			FL	. `	
SIGNATURE _	Signature, typed or pricted name of registers Lagent OFFICERS AND		iOTE_Registered Agr	nt signature require	d when reinstalling: ADD/TIONS/CHANGES TO DE	DATE	D DIRECTO	RS IN 12
ITLE	PO DELETE TAYLOR, HENRY A.		1 1 TIFLE 1.2 NAME				Change	Add-tion
IAME								
TREET ADDRESS	3600 AVENUE "T"		1.3 STREE	T ADDRESS				
ITY-ST-ZIP	RIVIERA BEACH FL		1.4 CiTY-				Charge	FT Addition
ITLE	STD	☐ DEFELE	2 1 TITLE				☐ Change	Addition
IAME	TAYLOR, ELIZABETH ANN		2.2 NAME					
TREET ADDRESS	3600 AVENUE "T" RIVIERA BEACH FL		2.3 STREE 2.4 CHTY-	T ADDRESS				
ITY-ST-ZIP ITLE	DELETE		3 1 TITLE				Change	Addition
LAME			3.2 NAME					
TREET ADDRESS			33 STRE	ET ADDRESS				
DITY-ST-ZIP			3.4 CHTY	ST-ZIP				
ITLE	DELETE		4. 1 TIFLE				Change	Addition Addition
IAME			4.2 NAME					
TREET ADDRESS				1 ADDRESS				
CITY-ST-ZIP		DELETE	4 4 CITY				Change	Addition
HLF			S 1 JiTU					
NAME			5.2 NAMI	ET ADDRESS				
SZEROCA FEBRIC			5 4 CITY					
CITY - ST - ZIP TITLE		DELETE	6 1 TiTL			·	Change	Addition
NAME			6 2 NAM					
NAME STREET ADDRESS				ET ADDRESS				
STUTEL MODULESS	I .			· 1				

CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 officer or director of the corporation or the receiver or trusted 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:

SIGNING OFFICER OF PRECTOR Taylor

(407) 842-7362 Cayt me Phone #