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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

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9. Name and Address of Current Registered Agent PEEPLES, JAMES W., III, ESQUIRE 505 NORTH ORLANDO AVENUE COCOA BEACH FL 32931 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing at the registered agent, or both, in the State of Florida, Super change was authorized by the corporation's board of directors. I hereby accept the appointment as registered difficent further with, here for prime rane of appointment as registered agent. I am familiar with, here or prime rane of appointment and on accept the appointment as registered agent. I am familiar with, here or prime rane of appointment and on accept the appointment as registered agent. I am familiar with, here or prime rane of appointment and on accept the appointment as registered agent. I am familiar with, here or prime rane of appointment and on accept the appointment as registered agent. I am familiar with, here or prime rane of appointment and on accept the appointment as registered agent. I am familiar with a company of accept the appointment as registered agent. I am familiar with a company of accept the appointment as registered agent. I am familiar with a company of accept the appointment as registered agent. I am familiar with a company of accept the appointment as registered agent. I am familiar with a company of accept the appointment as registered agent. I am familiar with a company of accept the appointment as registered agent. I am familiar with a company of accept the appointment as registered agent. I am familiar with a company of accept the appointment as registered agent. I am familiar with a company of accept the appointment as registered agent. I am familiar with a company of accept the appointment as registered agent. I am familiar with a company of accept the appointment as registered agent. I am familiar with a company of accept the appointment as registered agent. I am familiar with a company of accept the appointment as regist		Country Zip Co			y	8. This corporation has liability for	intangible tax under s	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, 1 am service agent, and accept the obligations of, Section 607.0502, Florida Statutes. SIGNATURE Significe hybrid or principlane of agentical agent as this flagocate. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ITIE W MCDANIEL, LARRY 402 HIGH PT DR. COCOA FL 11. STREET ADDRESS COTY-51-2P TILE PD URSCHENBAUM, MALCOLM R. 402 HIGH PT DR. 22 SMALE 402 HIGH PT DR. 23 SIRRET ADDRESS COTY-51-2P TILE DIDDMENICO, PATRICK E. 402 HIGH PT DR. COCOA FL 13. SIRRET ADDRESS COTY-51-2P TILE DELETE 31 TILLE COCOA FL 32 NAME 33 SIRRET ADDRESS COTY-51-2P TILLE DELETE 51 TILLE DELETE 4 TILLE COCOA FL 32 NAME 402 HIGH PT DR. COCOA FL 33 SIRRET ADDRESS COTY-51-2P TILLE DELETE 51 TILLE COCOA FL 4 TILLE COCOA FL 4 TILLE COCOA FL 34 CHY-51-2P TILLE COCOA FL 35 SIRRET ADDRESS COTY-51-2P TILLE COCOA FL 35 SIRRET ADDRESS COTY-51-2P TILLE COCOA FL 36 SIRRET ADDRESS COTY-51-2P TILLE COCOA FL 35 SIRRET ADDRESS COTY-51-2P TILLE COCOA FL 36 SIRRET ADDRESS COTY-51-2P TILLE COCOA FL 37 NAME 38 SIRRET ADDRESS COTY-51-2P TILLE COCOA FL 38 SIRRET ADDRESS COTY-51-2P TILLE COCOA FL 39 SIRRET ADDRESS COTY-51-2P TILLE COCOA FL 30 SIRRET ADDRESS COCOA FL 30 SIRRET ADDRESS COCOA FL 31 SIRRET ADDRESS COCOA FL 32 NAME 33 SIRRET ADDRESS COCOA FL 34 CHY-51-2P COCOA FL 35 SIRRET ADDRESS COCOA FL 36 SIRRET ADDRESS COCOA FL 37 NAME 38 SIRRET ADDRESS COCOA FL 40 SIRRET ADDRESS COCOA FL 40 SIRRET ADDRESS COCOA FL 40 SIRRET AD				83			-	
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		certify that the information supplied wit	h this filing is voluntarily furn	64 CRY-S hished and doe	s not qualify t	or the exemption stated in Section 1197	7/31/k) Florida Statut	as 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 trustee empowered to execute this report as required by Chapter 607, Fiorida Statutes; and that my name appears in Block 12 or Block 18 if changed by on an attachment with an address.

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

Deytime Phone #