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

CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # 1. Corporation Name

H12491

(7)

DECCA	Principal Place of Business 2a. Mailing Address 26 Suite, Apt. #, etc. 27											
Principal Place	It Place of Business SW 104TH LANE A FL 34481 Spall Place of Business Spall Place of Business Spall Place of Business 2a. Mailing Address 2b. Mailing Address 2c.							A LAMBARAL MAN HANGAR HANGER MANAGERAN	91 \$181 B1 8 1	. 41811 01811 010	E1E1: 9:811 109	
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US			U\$				3. Date Incorporated or Qualified			•		
2. Principal Pla	ce of Business	2a.	Mailing Address					4. FEI Number	_ 4		Applied For	
21			26					59-2616172		Not Ap		
Suite, Apt. #, etc. 22 City & State 23			Suite, Apt. #, etc.					5. Certificate of Status Desired		+	\$8.75 Additional Fee Required	
			⊢ ¬					6. Election Campaign Financing	—	\$5.00 May Be		
								Trust Fund Contribution		Added to Fees		
Zip 24	h=~	29	Zip	30 Coun	try				s 🔲 No)	s 199.032,	
	Name and Address of Curren	t Regis	tered Agent		т			10. Name and Address of New	Register	ed Agent		
				18	B1	Name						
9. Name and Address of Current Regis GHUMMAN, KULBIR 8865 SW 104TH LANE OCALA FL 32676 11. Pursuant to the provisions of Sections 607.0502 and 60 or registered agent, or both, in the State of Florida. Suctamiliar with, and accept the obligations of, Section 607.				1	B2	Street A	Address	dress (P.O. Box Number is Not Acceptable)				
OCALA	FL 32676			["	83							
				ļ.	84	City			E	-L 85 7	Zip Code	
or registere familiar with	ed agent, or both, in the State of Floric h, and accept the obligations of, Sect	da. Suci ion 607.	h change was authori .0505, Florida Statutes	zed by the co	orbe	oration s	Doaro (or directors. Thereby accept the ap-	nemIn·oq rad	i as registere	ed agent. I an	
12.				13.		_ ::		ADDITIONS/CHANGES TO OF	FICERS /	AND DIRECT	ORS IN 12	
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14. Ldo herek	Legistry certify that the information supplied	with thi	s filing is voluntarily ful	mished and	doe	s not qu	ality for	the exemption stated in Section 11	9.07(3)(k). Florida Sta	itutes. I furthe	

roo hereby certify that the information supplied with this filling is voluntarily turnished 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 eath; 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:

James A. Bell

3-22-96 (352) 854-6210