FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANNUAL REPORT 1997			Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS				Secretary of State				
DOCU 1, Corporation HERCAL		74	(4)	- 11e 11		· · · · · · · · · · · · · · · · · · ·		#### #################################			
Principal Plac	ce of Business	Mailing Ad	dress					LYBYL BYDYL BYDY			
1798 HERCULI CLEARWATER		1798 HERCU	1798 HERCULES AVE CLEARWATER FL 34625-1116								
							3. Date Incorporated or Qualified 09/26/1984	1	of Last Re /1996	aport	
·	Place of Business	2a. Mailing	Address				4. FEI Number			plied For	7
Suite, Apt	l. #, etc.	26 Suite, A	spt. #, etc.				59-2446034 5. Certificate of Status Desired		\$8.75 / Fee Re		-
City & Sta	de	City & S	State		······································		6. Election Campaign Financing		\$5.00		1
23	Country	28		<u> </u>	untry		Trust Fund Contribution		Added t		_
7ip	Country 25	Ζιρ 29	ļ	30	ariti y		This corporation has liability for Florida Statutes	intangible ta] Yes []		199.032,	-
	g, Name and Address of Co		jent				10. Name and Address of New Re				1
	/MOND, J. PAUL				81 Name						
	CLEVELAND ST				82 Street	Addre	ss (P.O. Box Number is Not Acceptat	ole)		.,	7
CLE	EARWATER FL 33515				83		·				4
					03						
					84 City			FL	85 Zip (Code	
11. Pursuani	t to the provisions of Sections 607	7.0502 and 607.1508,	Florida Statute	s, the s	bove-named	corpo	ration submits this statement for the p		hanging it	s registered	d -
office or agent 1.	registered agent, or both, in the t am familiar with, and accept the c	State of Florida. Such obligations of, Section	change was a 607.0505, Flo	uthorize rida Sta	d by the cor lutes.	poratio	ration submits this statement for the pin's board of directors. I hereby accept	ot the appoi	ntment as	registered	1
SIGNATURE	Signalize Typed or primed forms of register	and according to a life the topological	n (NOTE	Panietare	d Agent signatur	zenuiron	when reinstating)	DATE			
12.		S AND DIRECTORS	(107)	13.	a rigott arginatur	7 10 40 10 10	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	S IN 12	ે જૂ
TITLE	PS		DELETE	1.1 1	TLE				Change	Addition	CR2E034 (9/96)
NAME.	KENT KUIDERA			1.2 N	AME	Ke	nt Kridera 57 Arabian Ln. Um Harbor FL.3				8
STREET ADDRESS		•		1	TREET ADDRESS	16	57 Arabian Ln.	سرید دو .			<u>K</u>
C-TY - ST - ZIP	CLEARWATER FL		DELETE		ITY-ST-ZIP	1.0	Um Harbor Fr. 3	4683	Change	Addition	၂뜻
TITLE NAME	DARRALD WILSON	l	LL DICCIE	2.1 T		}		L	Vitalige	AUDITOR C.	
STREET ADDRESS	CALL CLUME GOV DO				TREET ADDRESS	1					
CITY-ST-ZIP	CLEARWATER FL			1	City-ST-ZIP	1	3462	5			1
TITLE	, , , ,		DELETE	3.1 T					Change	Addition	ıŢ
NAME				3.2 N	AME						
STREET ADDRESS					TREET ADDRESS						
CITY-S1-ZIP			DELETE		OTY-ST-ZIP	 	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Change	Addition	-
TIPLE			PPT DETER	411	ITLE VAME	1		L	T cuantia	[_] A00(00)	` }
NAME STREET ADDRESS					vame Treet address	ļ					
CITY - ST - ZIP					TY-ST-ZIP						
TITLE	<u> </u>		DELETE	5.1 3		1			Change	Addition	ī
NAME				5.2 1	AME	1					1
STHEET AUDRESS				535	TREET ADDRESS						•
CITY-S(-ZIF					ITY-ST-ZIP	ļ			1 4		÷
TITLE			DELETE	6.1 T		1		L	Change	□ v	
NAME captel address				6.2 N	ame Treet a odress						
STREEL ADDRESS	1			0.33	THE LANGUEGO						

14. 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 supplimental annual eport is true and accurate and that my signature shall have the same legal effect as if made under oal Lam an officer or director of the corporation or the receiver or true the empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or plock 33 if changes, open an attachment, with an address. Lam an officer or director of appears in Block 12 or block

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

FILED

Feb 27 1997 8:00am