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PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

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Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H23899

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rincipa: Place 1403 S. HWY O. BOX 1850 ELLEVIEW FL	1 1850 P.O. BOX 1850 W FL 34421 BELLEVIEW FL 34421-1850											
3			US	US					3. Date Incorporated or Qualified 3a. Date of Last Report 0/01/1984 03/18/1996			Report
	Principal Place of Business			. Mailing Addres	ss			4. FEI N			—— <del>—</del>	pplied For
Suita Ant	Suite: Apt. #, etc.		26	Suite, Apt. #, etc.			28	59-2482282		Not Applicabl  \$8.75 Additional		
Oone, Apre.	Source, representations			27			5. Certificate of Status Desired		Fee Requ			
City & State	0			City & State				6. Elect	ion Campaign Financing		\$5.00	May Be
			28		······································			<del>}</del>	Fund Contribution		Added	to Fees
<b>Ζ</b> φ		Country	29	Zip		Country	,		corporation has liability fo la Statutes	or intangible Yes		s. 199.032,
L		and Address of Cur		stered Agent	3	90			e and Address of New I			
JOH	INSON, RU					81	Name	10				·
11403 S. HWY 301						82	Street Add	Irass (P.O. Br	ox Number is Not Accept	table\		
BEL	LEVIEW FL	34491						.0. 0	ox radiniser is radi Accept	table/		
						83						
						84	City				85 Zip	Code
							h '			FL	_     `	
DE TAINSY					a Statutes e was au 505, Flori	s, the above thorized by ida Statutes	e-named corp the corpora s.	poration sub tion's board	mits this statement for the of directors. I hereby according to the control of directors.	e purpose o cept the app	f changing pointment as	its registere s registered
IGNATURE.	Signature, typical	ions of Sections 607.6 ent, or both, in the St th, and accept the ob- or pented name of regularies OFFICERS.	Lagont and title	e il applicable. CTORS	(NOTE:	Registered Age	e-named corp y the corpora s.	ired when reinstal		e purpose o cept the app DATE	DIRECTO	RS IN 12
ignature. <b>2.</b> Ile	Signartine, typical	or printed name of registimed	Lagont and title	e if applicable.	(NOTE:	Registered Age		ired when reinstal	ing)	e purpose o cept the app DATE		RS IN 12
gnature. 2. Ilf	DP JOHNSO 11403 S.	or pented name of regulared OFFICERS. N, RUSSELL HWY. 301	Lagont and title	e il applicable. CTORS	(NOTE:	Registered Age 13.	on signature requi	ired when reinstal	ing)	e purpose o cept the app DATE	DIRECTO	RS IN 12
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