CORP ANNUA	ROFIT PORATION AL REPORT <b>996</b>	Sandra Secre	AR1MENT OF STATE a B. Mortham etary of State F CORPORATIONS		
OCUN Dorporation N SASMA		41 (0)			22. 119: 0(21) 0191 0191 0191 0(0) 0(0)
cipal Place o	of Business	Mailing Address			
08 Sylvia D 9 O Box 559 Deltona Fl	Я	908 SYLVIA DR P O BOX 5591 DELTONA FL 32728-	2591	3. Date Incorporated or Qualified 10/18/1984	<b>3a.</b> Date of Last Report <b>07/03/1995</b>
Principal Plac	ce of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. #,	, etc.	26 Suite, Apt. #, etc.		59-2483099 5, Certificate of Status Desired	\$8.75 Additional
City & State		27 City & State		6. Election Campaign Financing	Fee Required
-		28		Trust Fund Contribution	Added to Fees
?ip	Country 25	Ζιρ 29	Country 30	8. This corporation has liability fo Florida Statutes	r intangible tax under s. 199.032, is : 🔲 No
	g. Name and Address of Curren	nt Registered Agent	81 Name	10. Name and Address of New	Registered Agent
MARTIN,	00050				
			92 Otront Art	droop (P.O. Boy Number is Not Accenta	
908 SYL				dress (P.O. Box Number is Not Accepte	acie;
908 SYL			82 Street Add	dress (P.O. Box Number is Not Accept	
908 SYL DELTON	VIA DR A FL 32725	ida. Such change was author	83 64 City ites, the above-named corporation's bo	dress (P.O. Box Number is Not Accept oration submits this statement for the p and of directors. Thereby accept the ap	FL B5 Zip Code
908 SYL DELTON	WA DR A FL 32725 the provisions of Sections 607.050 d agent, or both, in the State of Flor n, and accept the obligations of, Sec Senatore, back or protect name of rugidiced agent	ida Such change was author tion 607.0505, Florida Statut stara too diapolection ( ID DIRECTORS	83 84 City ites, the above-named corp ized by the corporation's bo es NOTE: Registrat Agent signature man 13.	oration submits this statement for the p and of directors. Thereby accept the ap	FL       85       Zip Code         urpose of changing its registered officient as registered agent. I am       DA1L         DA1L       EFICERS AND DIRECTORS IN 12
908 SYL DELTON	VIA DR A FL 32725 In the provisions of Sections 607.050 Ind agent, or both, in the State of Flor h, and accept the obligations of, Sec Signature, back or protect name of highlight age OFFICERS AN DV SASSER, THURMAN 1220 WHITE OAK CREEK	idal Such change was author tion 607.0505, Florida Statute mans tool tapplocide	83 84 City ates, the above-hanied corporation's boost white above-hanied corporation's boost 13. 14. 1.1 THE 1.2 NAME 1.3 STREET ADDRESS	oration submits this statement for the p and of directors. Thereby accept the ap	FL 85 Zip Code urpose of changing its registered offi pointment as registered agent. I am
908 SYL DELTON	MA DR A FL 32725 b the provisions of Sections 607.050 d agent, or both, in the State of Flor h, and accept the obligations of, Sec Signature, back or protect name of hydrocel age OFFICERS AN DV SASSER, THURMAN 1220 WHITE OAK CREEK BURNSVILLE NC	ida Such change was author tion 607.0505, Florida Statut stara too diapolection ( ID DIRECTORS	83     84     City     ized by the corporation's bolds     3016. Hogsteid Age disignation term     13.     1111.E     1.2 NAME	oration submits this statement for the p and of directors. Thereby accept the ap	FL       85       Zip Code         urpose of changing its registered officient as registered agent. I am       DA1L         DA1L       EFICERS AND DIRECTORS IN 12
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