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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

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Feb 04 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # H38668

(0)

Principal Place of Business Mailing Address ** EDWIN W. PECK 2430 S. ATLANTIC AVE. DAYTONA BEACH SHORES FL 32118-5418 ** DAYTONA BEACH SHORES FL 32118-5418				3. Date Incorporated or Qualified Sa. Date of Last Report	
2 Principal	Place of Business	2a. Mailing Address		01/21/1985 4. FEI Number	02/06/1996 Applied For
1	THE STATE OF THE S	26		59-2485164	Not Applicab
Suite, Ap	t #, etc	Suite, Apt. #, etc.			\$8.75 Additional
2		27		5. Certificate of Status Desired	Fee Required
City & Str	ale	City & State		6. Election Campaign Financing	\$5.00 May Be
3	Country	28 Zip	Country	Trust Fund Contribution	Added to Fees
Zip 4	25 Cocara, y	29	30	This corporation has liability for Florida Statutes	or intangible tax under s. 199.032, Yes No
<u> </u>	9. Name and Address of Curi		1301	10. Name and Address of New F	
DE	CK, EDWIN W.		81 Name		
	30 S. ATLANTIC AVE.		82 Street Add	dress (P.O. Box Number is Not Accepta	oblo)
	YTONA BEACH SHORES FL 32	018	OZ SIIGOLAGO	iless (i .O. box indinibili is not Accepte	auloj
5. .			83		
			84 City		85 Zip Code
			A '		FL
office of	nt to the provisions of Scott? is 607.0 r registered agent, or toth, in the St am fam liar with, appliances the ob-	ale of Florida, Juch change was Enations of Jection Co. 05.05	authorized by the corpora	ation's board of directors. I hereby acc	ept the appointment as registered
	(dwn	~ 11- sec	OTE: Registered Agent signature requ		6-97 DATE
SIGNATURE	Signature Good Stated name of regular o	agent and title if applicable. (NO	k		6-9-7 DATE FICERS AND DIRECTORS IN 12
SIGNATURE	Signed as Garage Production of the CERS A	agent and title if applicable. (No	DTE: Registered Agent signature required 13.	uired when reinslating)	6-97 DATE
SIGNATURE 12. HTGE WME	Signed as Garage Properties of Street Properties of PVS PECK, EDWIN W.	agent and title if applicable. (NO	DTE: Registered Agent signature required 13. 1.1 TITLE 1.2 NAME	uired when reinslating)	6-9-7 DATE FICERS AND DIRECTORS IN 12
SIGNATURE ITEE IAME SIREET ADDRESS	Signature Guest Printed name of regulation of OFFICE RS A PVS PECK, EDWIN W. \$ 2625 S. ATLANTIC AVE.	agent and title if applicable. (NO	TE: Registered Agent signature required to the signature required to t	uired when reinslating)	6-9-7 DATE FICERS AND DIRECTORS IN 12
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SIGNATURE 12. TITLE NAME SIREET ADDRESS CITY-SE-ZIP TITLE	PVS PECK, EDWIN W. 2625 S. ATLANTIC AVE. DAYTONA BEACH SH FL	agent and title if applicable. (NO	TE: Registered Agent signature required. 13. 11 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-SI-ZIP 2.1 TITLE	uired when reinslating)	6-9-7 DATE FICERS AND DIRECTORS IN 12
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