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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED Apr 16 1997 8:00am Secretary of State



ANNUAL 19	RATION REPORT		Socret	B. Mortham ary of State CORPORATIONS	Secreta	ary of S	State
DOCUME 1. Corporation Nar LARRY BRA		46577	(3)		E IÈBIRH DIN DIRIS DIFO BENDADIN (DA)	ÁINII AIRII BIRII AIRII AIRII	
Principal Place of E	Rusiness	<u> </u>	Mailing Address				
504 ALTHEA AVE.	Dusmoos		304 ALTHEA AVE.		:		
TAMPA FL 33812		1	TAMPA FL 33612-7404				
1 7					3. Date Incorporated or Qualified	3a. Date of Last F	Report
2. Principal Place o	of Business	2	a. Mailing Address		03/12/1985 4. FEI Number	04/30/1996	pplied For
Suite Ant. # ata		26	26		59-2503057		ot Applicat
12	Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired See Required Fee Required		
	City & State		City & State		Election Campaign Financing Trust Fund Contribution Added to Fees		
Zip	Count	ry 28	Zip	Country	Trust Fund Contribution 8. This corporation has liability for i		
14	25	29 ess of Current Reg		30		Yes No	
BRAZIL, I		ess of Culter neg	Instalen Agent	81 Name	10. Name and Address of New Ne	Bistelen Wallt	
				84 City			Code
3	provisions of Sec ered agent, or bot miliar with, and acc	stions 607.0502 and h, in the State of Fic cept the obligations	607.1508, Florida Statu rida. Such change was of, Section 607.0505, F	1 1	rporation submits this statement for the p ation's board of directors. I hereby accep		
SIGNATURE Signature	lure, typed or printed nam	ic of registored agent and t	itle if applicable (NC	Ites, the above-named cor authorized by the corpora torida Statules.	uited when reinstaling)	PL urpose of changing it the appointment as	ts registere registered
SIGNATURE Signature 12. TITLE PS	lure, typed or printed nam C		itle if applicable (NC	ites, the above-named cor authorized by the corpora torida Statules.		PL urpose of changing it the appointment as	ls registered registered
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I do hereby certify that the information supplied with this filling 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 roport or supplemental annual roport is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee 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.