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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H48144

(0)

FILED May 05 1997 8:00am Secretary of State

Principal Place of Business Mailing Address 5599 BABCOCK ST. N.E. PALM BAY FL \$2907 Mailing Address 5599 BABCOCK ST. N.E. PALM BAY FL \$2907-2307												
							ncorporated or 0	Qualified		ate of Last 19/1996		
	Place of Business	2a. Mailing Address	··			4. FEI N	nuper		1 44		Applied F	For
21 Suite, Apt	t # ele	Suite, Apt. #, etc.				597	2529801		_		Not Appli Addition	
22	,	27				5. Certifi	cate of Status D	esired 	R		Required	
City & Sta	do	City & State					on Campaign Fir	-	r-1		O May B	
23] Zipi	Country	28 Zip	Cou	intry			Fund Contribution orporation has li		tengible		d to Fees	
24	25	29	30			Florida	a Statutes		Yes	X No	3. 100.0	
	9. Name and Address of Cur	rent Registered Agent		221		10. Name	and Address o	of New Reg	istered	Agent		
	TLAN, PAUL			L 1.	ame							
	99 BABCOCK ST. N.E. LM BAY FL 32907			82 St	reet Addre	ss (P.O. Bo	x Number is Nol	Acceptab	(e)			
179	DIVIDENT TE GEGOT			B3								
				84 Ci	ty		·			85 Zi	p Code	
	of to the provisions of Sections 607.0 registered agent, or both, in the St am familiar with, and accept the ob-	0500 1003 1500 5 1 00			-		Sec. 10 Sec. 12 Sec. 15		FL	. '	- h	
		to a contract of the Maria Mar	N.076 Pro-	4.4.5.5.5					DATE			
12.		agent and title if applicable () AND DIRECTORS DELETE	NOTE: Registere 13.		nature tequirer	d when reinstatin	9) ONS/CHANGES	TO OFFIC	DATE ERS ANI	D DIRECTO		2 Addition
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14. I do hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; the Lam an officer or director of the colonial alloyor that he present a supplemental that my name appears in Block 12 or Block 13 if changes, or or a partition with an address.

SIGNATURE:

TURE AND TYPED ON PRINTED WAS OF MONING OFFICER, OR PRINCETOR

2597 (407) 676-0998