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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

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2. Principal Packs of planness 2. Multing Address S. Surie, April 14, 1955.  Suite, April 14, 1955.  Cony & State 20 TAMPA FL.  Zop 20 Country 20 State 9, Name and Address of Current Registered Agent  HOWELL, MARY ELIZABETH 4315 SYLVAN RAMBLE TAMPA FL.  11. Pursuent to the provisions of Sections 607,0762 and 607,1508. Finish Statutus, Bus above, named corporation submits for increased agent, or both, in the State of Florats. Such change was authorized by the corporation submits this statement for increased agent, or both, in the State of Florats. Such change was authorized by the corporation submits this statement for increased agent, or both, in the State of Florats. Such change was authorized by the corporation submits this statement for increased agent, or both, in the State of Florats. Such change was authorized by the corporation submits this statement for increased agent, or both, in the State of Florats. Such change was authorized by the corporation submits this statement for increased by the corporation submits the statement for increased by the corpora	Qualified	]	ate of Last 05/23/1		
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9, Name and Address of Current Registered Agent  HOWELL, MARY ELIZABETH 4315 SYLVAN RAMBLE TAMPA FL 33809  11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above named corporation submits this statement for the or registered agent, or both, in the State of Florida, Such change was authorized by the Corporation's board of directors. Thereby accept the familiar with, and accept the obligations of Sections Scotter 607,0506, Florida Statutes.  SIGNATURE  DEVIATION OF FIGHER AND DESCRIPTION OF FIGHER ADDITIONS/CHANGES TO DELETE  12. OF FIGHER AND DESCRIPTION OF FIGHER AGENT AGE				ded to Fees s 199,032	
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4. I do hereby certify that the information supplied with this fling is voluntarily furnished and does not qualify for the exemption stated in Section certify that the information indicated on this armual report or supplemental annual report is true and accurate and that my signature shall have not that Limit and officer or director of this corn paths that the properties of the section of the	tion 110 0	07(3)(b) Fig	orida Stat	itor I fuetho-	

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