SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION **ANNUAL REPORT**

1997

Brand Million Brand



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H53460

(2)

Principal Place of Business	Mailing Address			
9972 BAYMEADOWS RD JACKSONVILLE FL 32256 US	9972 BAYMEADOWS RD JACKSONVILLE FL 32256 US			
2. Principal Place of Business	2a. Mailing Address			
Sulte, Apt. #, etc.	26 Suite, Apt. #, etc.			

FILED Sep 18 1997 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address					DIGIT BIETI	41911 WIBI	01811 EIE		
9972 BAYME		9972 BAYMEADOWS RD									
JACKSONVILI US	LE FL 32256	JACKSONVILLE FL 32256 US			DO NOT WRITE IN THIS SPACE						
00		00				3. Date Incorporated or Qualified		te of Las	st Repor	1	
						04/17/1985		01/19	•		
2 Principal P	lace of Business	2a, Mailing Address				4. FEI Number	U0),	או זו ח	Applie	d For	
21		26				59-2523344		}	 ``	plicable	
Sulte, Apt.	#. etc.	Suite, Apt. #, etc.						\$8.7	5 Addit		
22		27				5. Certificate of Status Desired			Requir		
City & State	e	City & State				6. Election Campaign Financing		\$5.0	00 May	. Bo	
23		28				Trust Fund Contribution			ed to Fe		
Zip	Country							is paid the current year Intangible			
24	25	29	30			Personal Property Tax due June	_	Yes	□ No		
	g, Name and Address of Current	Registered Agent				10. Name and Address of New Reg	istered /	gent			
GA	RTNER, SHARON M			81	Name						
	72 BAYMEADOWS RD			B2	Stroot Add	ress (P.O. Box Number is Not Acceptable	0)				
	CKSONVILLE FL 32256				Bliedt Addi	Address (F.O. box Number is Not Acceptable)					
•				83				,			
					00			T1 -	·		
				84	City		FL		ip Code	- 1	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statul	tes, the al	bove	-named corp	poration submits this statement for the pution's board of directors. I hereby accep	irpose of	changin	g its reg	gistered	
agent. I a	m familiar with, and accept the obligat	ions of Section 607.0505, Fi	orida Stal	tutes	ine corpora	tions board of directors, Thereby accep	ine appi	i Municiosit	as legi	SIGIGO	
SIGNATURE .		s Sharen (PY YOE	181	r. Pre	siderit	9114	97		1	
	orgnature, typed or printed name of registered agont			d Age	nt signature requi	red when reinstating)	DATE				
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICE	ERS AND				
TITLE	DAS CARTHEO WA	☐ DELETE	1.1 T)					∐ Chan	ge L	Addition	
NAME	GARTNER, W.A.		1.2 N	AME						- 13	
STREET ADDRESS	1660 PRUDENTIAL DR., 203		1.3 \$1	TREET	ADDRESS					1	
CITY-ST-ZIP	JACKSONVILLE FL			1.4 CITY-ST-ZIP							
TITLE	DP ALLER ALL	☐ DELETE	2.1 1	1LE	1		٠	Chan	ge L	Addition (
NAME				2.2 NAME							
STREET ADDRESS	1660 PRUDENTIAL DR., 203		2.3 \$1	REET.	ADDRESS					ļ	
CITY-ST-ZIP	JACKSONVILLE FL	JACKSONVILLE FL		2. 4 CITY - ST - ZIP		1 · · ·					
TITLE		☐ DELETE	3.1 TI	TLE	-			Chan	ge 🗀	Addition	
NAME			3.2 N	AME	ł						
STREET ADDRESS			3.3 S1	REET	ADDRESS						
CITY-ST-ZIP			3.4. 0	ITY-S	T-ZIP						
TITLE		☐ DELETE	4.1 10	TLE				☐ Chan	ge 🗀	Addition	
ÑAME			4. 2 N	AME						ļ	
STREET ADDRESS			4.3 \$1	FREET	ADDRESS						
CITY-ST-ZIP			4.4 CI	TY-\$1	I-ZIP						
TITLE		☐ DELETE	5.1 71	TLE				Chan	ge 🗀	Addition	
NAME			5.2 N	AMÉ	Ì					1	
STREET ADDRESS			5.3 S	REET	ADDRESS						
CITY-ST-ZIP			5.4 CI	TY-SI	r-ZIP						
TITLE		DELETE	61 TI					Chan	ge 🗀	Addition	
NAME -			6.2 N	AME							
STREET ADDRESS			6.3 S	IREET	ADDRESS					1	
	•				1					i	

14. I do hereby certify that the information supplied with this filing 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 report or supplemental annual report 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.