SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 DOCUMENT #

H60688

(9)

BERES ENTERPRISES, INC.					
Principal Place o	of Business	Mailing Address		i imtimit Arim Antri deine misen idset in	it Gilli Bibli Bible Ellis Arbis Arbis saar
2411 W. HWY. 98 PORT ST. JOE FL 32456		2411 W. HWY. 98 PORT ST. JOE FL 32456			
				3. Date Incorporated or Qualified 06/06/1985	3a. Date of Last Report 01/20/1995
2. Principal Plac		2a. Mailing Address	1 120	4. FEI Number 59-2541372	Applied For Not Applicable
و مرتب ا	They To	26 3/55 W. F. Suite, Apt. #, elc.	1 wy 98		\$8.75 Additional
Suite, Apt. #,	5 w. Hwy 98	27	•	5. Certificate of Status Desired	Fee Required
2 3 5 2 City & State	1001 1100 10	City & State		6. Election Campaign Financing	\$5.00 May Be
3 PORT	StJoe	28 PORT ST.JO.	c, t- L,	Trust Fund Contribution	Added to Fees
Zip	Country	Žip	Country	8. This corporation has liability for	intangible tax under s. 199.032,
4 -	25 32456		o Gult	Florida Statutes  10. Name and Address of New Re	J
	9. Name and Address of Currer	nt Registered Agent	81 Name	To. Italio una Address of the	
	es, thomas a			100 County or in Not Accorda	blo)
	I WEST HIGHWAY 98		82 Street Ad	dress (P.O. Box Number is Not Acceptal	Die)
POR	rt st joe, fl fl 32456		B3		
			24 0		85 Zip Code
			84 City Pol	or StaTor	FL   132456
11 Pursuant to	the provisions of Sections 607 050	2 and 607.1508 Florida Statutes	the above-named co	rporation submits this statement for the patients heard of directors. Thereby accept	ourpose of changing its registered
	gistered agent, or both, in the State	of Florida, Such change was aut	horized by the corpora	ation's board of directors, I rieleby accep	of the appointment as registered
office or re	Tomillor with land a reent the oblig				
	i familiar with, and accept the oblig	ations or, Section 607.0505 Trock	da Statutos		
SIGNATURE	ifamiliar with, and accept the oblig		Forgistered Agent signalure rec	guired when re-rostating)	DATE
SIGNATURE	signature. Typed or printed name of required a g OFFICERS AN	estandible 1 applicable (6.01). ND DIRECTORS	Fargistered Agent signature res	quired when recessaring) ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRECTORS IN 12
SIGNATURE	Signature typed or protect have of teleplatinad as	ect and bir it applicable (6.01).	Fragistical Agent signature res	ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRECTORS IN 12 Change Addition
SIGNATURE :	OFFICERS AN ST BERES, ROCHELLE A.	estandible 1 applicable (6.01). ND DIRECTORS	Fragistical Agent signature res	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12 Change Addition
SIGNATURE 5	OFFICERS AN ST BERES, ROCHELLE A. 2411 W HWY 98	estandible 1 applicable (6.01). ND DIRECTORS	Fragistical Agent signature res	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12 Change Addition
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-SI-ZIP	OFFICERS AN ST BERES, ROCHELLE A.	rectand tills Lappinsable (6.01).  ND DIRECTORS  DELETE	Followed Agent signature for 13.  11 Tifle 12 NAME 13 SIREET ADDRESS 14 CITY ST-ZIP	ADDITIONS/CHANGES TO OFF BERES, Rochelle F 3155 W. Hwy98 PORT St Joe, FL.	CATI ICERS AND DIRECTORS IN 12 Change Addition  32456 Change Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	OFFICERS AN ST BERES, ROCHELLE A. 2411 W HWY 98 PT ST JOE FL	estandible 1 applicable (6.01). ND DIRECTORS	For general Agent signature for 13.  11 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST. ZIP 2.1 TITLE	ADDITIONS/CHANGES TO OFF BERES, Rochelle F 3155 W. Hwy98 PORT ST Joe, FL.	DATI ICERS AND DIRECTORS IN 12 Change Addition  32456 Change Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-SI-ZIP  TITLE  NAME	OFFICERS AN ST BERES, ROCHELLE A. 2411 W HWY 98 PT ST JOE FL P BERES, THOMAS A.	rectand tills Lappinsable (6.01).  ND DIRECTORS  DELETE	For general Agent signature for 13.  11 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST. ZIP 2.1 TITLE	ADDITIONS/CHANGES TO OFF BERES, Rochelle F 3155 W. Hwy98 PORT ST Joe, FL.	DATI ICERS AND DIRECTORS IN 12 Change Addition  32456 Change Addition
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SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	OFFICERS AN ST BERES, ROCHELLE A. 2411 W HWY 98 PT ST JOE FL P BERES, THOMAS A. 2411 W HWY 98	rectand title Lappinsable (E.O.) L.  ND DIRECTORS  DELETE  DELETE	Fig. gehard Agert signature for 13.  11 Tifle 12 NAME 13 STREET ADDRESS 1.4 CITY - ST. ZIP 21 Tifle 22 NAME 23 STREET ADDRESS 2 4 CITY - ST - ZIP	ADDITIONS/CHANGES TO OFF BERES, Rochelle F 3155 W. Hwy98 PORT ST Joe, FL.	DATI ICERS AND DIRECTORS IN 12 Change Addition  32456 Change Addition
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SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	OFFICERS AN ST BERES, ROCHELLE A. 2411 W HWY 98 PT ST JOE FL P BERES, THOMAS A. 2411 W HWY 98	DELETE  DELETE  DELETE	For global Agent signature for 13.  11 Tifle 12 NAME 13 SIPEET ADDRESS 1.4 CITY - ST - ZIP 21 TIFLE 22 NAME 23 STREET ADDRESS 2.4 CITY - ST - ZIP 31 TIFLE 32 NAME 33 STREET ADDRESS 34 CITY - ST - ZIP 41 TIFLE	ADDITIONS/CHANGES TO OFF BERES, Rochelle F 3155 W. Hwy98 PORT ST Joe, FL.	Change Addition    Change Addition   Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	OFFICERS AN ST BERES, ROCHELLE A. 2411 W HWY 98 PT ST JOE FL P BERES, THOMAS A. 2411 W HWY 98	DELETE  DELETE  DELETE  DELETE	Fo general Agent signature for  13.  11 TITLE 12 NAME 13 SIPEET ADDRESS 1.4 CITY - ST - ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 2.4 CITY - ST - ZIP 31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY - ST - ZIP 41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY - ST - ZIP	ADDITIONS/CHANGES TO OFF BERES, Rochelle F 3155 W. Hwy98 PORT ST Joe, FL.	Change Addition    Change Addition   Addition   Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	OFFICERS AN ST BERES, ROCHELLE A. 2411 W HWY 98 PT ST JOE FL P BERES, THOMAS A. 2411 W HWY 98	DELETE  DELETE  DELETE	Table 1 Agert signature 10:  13.  11 TITLE 12 NAME 13 SIPEET ADDRESS 1.4 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 2.4 CITY-ST-ZIP 31 TITLE 32 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 41 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.1 TITLE	ADDITIONS/CHANGES TO OFF BERES, Rochelle F 3155 W. Hwy98 PORT ST Joe, FL.	Change Addition    Change Addition   Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	OFFICERS AN ST BERES, ROCHELLE A. 2411 W HWY 98 PT ST JOE FL P BERES, THOMAS A. 2411 W HWY 98	DELETE  DELETE  DELETE  DELETE	Table 1 September	ADDITIONS/CHANGES TO OFF BERES, Rochelle F 3155 W. Hwy98 PORT ST Joe, FL.	Change Addition    Change Addition   Addition   Addition
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SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS	OFFICERS AN ST BERES, ROCHELLE A. 2411 W HWY 98 PT ST JOE FL P BERES, THOMAS A. 2411 W HWY 98	DELETE  DELETE  DELETE  DELETE	Table 1 Agert signature 10:  13:  11 Title 12 NAME 13 SIPEET ADDRESS 14 CITY - ST - ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY - ST - ZIP 31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY - ST - ZIP 41 TITLE 42 NAME 43 SIREET ADDRESS 44 CITY - ST - ZIP 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY - ST - ZIP 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY - ST - ZIP 61 TITLE	ADDITIONS/CHANGES TO OFF BERES, Rochelle F 3155 W. Hwy98 PORT ST Joe, FL.	Change Addition  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition  Change Addition
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made under oath, that I am an officer or director of the corporation or the receiver or trusted entitles my name appears in Blook 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE:

6/6/96 904.227-1443