## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	1996	DIVIDION	CORPORATIONS		
1. Corpora	UMENT # J0869 VIN J. TWISS, INC.	95 (5)			
***************************************	771 0. TV1100) 11(0)				
Principal Pl	ace of Business	Mailing Address		- I HORINA DIN BOND PONT DIKA HADI	0111 01011 01 <b>0</b> 11 01011 01011 01011 01011 1001
807 W. B	aker St.	807 W. BAKER ST.			
PLANT C	TY FL 33566	PLANT CITY FL 33566			
				3. Date Incorporated or Qualified 04/11/1986	3a. Date of Last Report
2. Principa	I Flace of Business	2a. Mailing Address		4. FEI Number	04/19/1995 Applied For
21		26		59-2660687	Not Applicable
	pt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
2] City & S	tato	27 Ch. 8 Ct.			Fee Required
23	ren é	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be
Ξ1	Country	7 <sub>(p)</sub>	Country	8. This corporation has liability for in	Added to Fees
24	25	29	30	Florida Statutes 🔲 Yes	□No
	9. Name and Address of Cur	rent Registered Agent		10. Name and Address of New R	egistered Agent
TOLERC	0 64543061 1		81 Name		
	s, melvin J. V. baker st.		82 Street Add	fress (P.O. Box Number is Not Acceptabl	e)
	T CITY FL 33566		83		
	1 011112 00000				
			84 City		FL 85 Zip Code
	at to the provinces of Cratical CO7.00				<b>[                                    </b>
11. Pursua	The trie provisions of Sections 607 0;	502 and 607.1508, Florida Statute	es, the above named corpo	pration submits this statement for the pure	oose of changing its registered office
				oration submits this statement for the purpard of directors. I hereby accept the appo	oose of changing its registered office intraent as registered agent. I am
	with, and accept the obligations of, S			oration submits this statement for the purp ard of directors. I hereby accept the appo	oose of changing its registered office intment as registered agent. I am
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certify that the information indicated on this armitial 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. 3/5/96 HURSS MELUIN J. TWISS