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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

| ACKSOMFILE FL 32207 ACKSOMFILE FL 32207-8554 S. Date Incorporated of Quarter 3a. Date of Less Report 11/24/1986 Q4/24/1998 | | 1997 | | DIVISION OF CORPORATIONS | | | Secretary of State | | |
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| 11/24/1986 | 1300 RIVERPLA | ACE BLVD | 1300 RIV Suite 6 | 1300 RIVERPLACE BLVD SUITE 610 | | | * (1981) 19 8 (() 8 7 8 8 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | BIBLI BIBLI DIBLI BIBLI BIBLI I | 11811 1991 |
| 2. Processor of New York States 2. Mailing Address 3. September 1. September 2. September | บร | | US | | | | | | ∍port |
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| Complete Status Description Fee Required Fee | 21] | | | | ****** | | 59-2739831 | | |
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| SUFFICE RELATIONS SURE 410 JACKSONNLE FL 32207 11. Present to the presented of the first presented of the first present of the purpose of changing its registered agent and make with an adecept the obligations of, Social of GOT 505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent and make with an adecept the obligations of, Social of GOT 505, Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered agent and make with an adecept the obligations of, Social of GOT 505, Florida Statutes. SIGNATURE 12. OF TICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS N 12. TOWERS, C.D. JR. 13. INTIE 1.5 TIME 1.5 TI | | | | Agent | 100 | | | | |
| SUITE 610 JACKSONVILLE FL 32207 83 | | | | | 81 | Name | | | · |
| Sale | | | | | 82 | Street Add | dress (P.O. Box Number is Not Acceptab | le) | |
| ### City ### List provisions of Sacritaris 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered algorit, or both, in the State of Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered algorit. I am familiar with, and accept the obligations of, Saccine 607 0505, Florida Statutes. **SIGNAL Lam familiar with, and accept the obligations of, Saccine 607 0505, Florida Statutes. **SIGNAL Lam familiar with, and accept the obligations of, Saccine 607 0505, Florida Statutes. **SIGNAL Lam familiar with, and accept the obligations of, Saccine 607 0505, Florida Statutes. **SIGNAL Lam familiar with, and accept the obligations of, Saccine 607 0505, Florida Statutes. **SIGNAL Lam familiar with, and accept the obligations of, Saccine 607 0505, Florida Statutes. **SIGNAL Lam familiar with, and accept the obligations of, Saccine 607 0505, Florida Statutes. **OFTICETS AND DIRECTORS** **OFTICETS AND DIRECTORS** **TOWERS, C.D. JR.** **1300 RIVERPLACE BLVD. SUITE 610 **JACKSONVILLE FL.** **PO DELETE 21 TITLE | | | • | | R3 | | | | |
| 1. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-handed corporation submits this statement for the purpose of changing its registered algorit, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered algorit, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered algorit, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered algorit, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered algorit, or both, in the State of Statutes. SYSTNATIUR! 12. | JAC | ASUNVILLE PL 3220 | 1 | | | | | | ***** |
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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.

SIGNATURE: .

SIGNATURE AND TYPED OF PRINTED NAME OF POINTS OFFICER OR DIRECTOR

04/25/97

904/396-1010

May 15 1997 8:00am