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

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

HALLI	n Name	# <b>J5674</b> Er run, Inc.	5 (9				<del> </del>	
Principal Place	e of Business		Mailing Address				ioi exil etak oleh oken eken	
4500 140TH AVE N. POST OFFICE BOX 17309 SUITE #101 CLEARWATER FL 34622 CLEARWATER FL 34622 US								
US						<ol> <li>Date Incorporated or Qualified 02/12/1987</li> </ol>	3a. Date of Last 05/01/1	
Principal Pl	lace of Busine	ess	2a. Mailing Address			4. FEI Number		Applied For
Suite Ant	# etc		26			59-2770927		Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, et	С,		5. Certificate of Status Desired		75 Additional e Required
City & State	e		City & State			Election Campaign Financing     Trust Fund Contribution		00 May Be
Zip	1	Country	Zip	Co	untry	This corporation has liability for		ded to Fees
<u> </u>		25	29	30		Florida Statutes	s 🔲 No	5 100.00Z,
	9, Name	and Address of Curren	it Registered Agent	<del></del>	81 Name	10. Name and Address of New I	Registered Agent	
ENGELL	HARDT DAI	NIFI A						
ENGELHARDT, DANIEL A. 4500 140TH AVENUE NORTH SUITE 101 CLEARWATER FL 34622						dress (P.O. Box Number is Not Acceptal	ble)	
					83			
				84 City		<b></b> 85	Zıp Code	
1 Dimarianti	A AL					pration submits this statement for the pu	F-1	•
or register								
familiar wit			on 607.0505, Florida Stat	utes.	corporation's boa	ard or directors. I hereby accept the app	pointment as register	ed agent. I am
familiar wit		of the obligations of, Section of printed name of registered agont.  OFFICERS AND	on 607.0505, Florida State	utes.	corporation's boa	ard of directors. I hereby accept the app	DATE	ed agent. I am
familiar wit	Signature, typed o	or printed name of registered agent. OFFICERS AND	on 607.0505, Florida State	(NOTE: Registere	corporation's boa	ard or directors. I hereby accept the app	DATE	ORS IN 12
familiar wit IGNATURE 2. ILE	Signature, typed o	OFFICERS AND	on 607.0505, Florida State and title if applicable.  DIRECTORS	(NOTE: Registere 1.1	d Agent signature require	ard of directors. I hereby accept the app	DATE  ICERS AND DIRECT	ORS IN 12
familiar wit GNATURE LE ME REET ADDRESS	P ENGELI- 4500 14	OFFICERS AND ARDT, DANIEL A. HOTH AVE NO. #101	on 607.0505, Florida State and title if applicable.  DIRECTORS	(NOTE: Registere 13. 1.11 12.N 1.3.5	d Agent signature require  TITLE  IAME  STREET ADDRESS	ard of directors. I hereby accept the app	DATE  ICERS AND DIRECT	ORS IN 12
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SIGNATURE:

4/26/96 (813)939-7002 Date Date Date