CORPC	OFIT DRATION	S	5	a B. Morth	am		
ANNUAL REPORT 1996 OCUMENT # Corporation Name			/	Secretary of State DIVISION OF CORPORATIONS			
		J67412	(3)				
	OL, INC.						
cipal Place of			Mailing Address				118 FIRT BIRTH
C/O THOMAS J. AULT 440 DAVENPORT AVE N.E. ST. PETERSBURG FL 33702		C/O THOMAS J. AULT 440 DAVENPORT AVE N.E. ST. PETERSBURG FL 3370 US		AVE N.E.		3. Date incorporated or Qualified 3a. Date of Last Report	
US						 Date Incorporated or Qualified 06/30/1987 FEI Number 	04/21/1995
Principal Place	of Business NEN PORT AV	E. N.E.	2a. Mailing Address 26 Same			59-2800931	Not Applicable
Suite, Apt. #, 6		ļ	Suite, Apt. #, etc.			5. Certificate of Status Desired	Fee Required
City & State			City & State			6. Election Campaign Financing Trust Fund Contribution	Added to Fees
^{Ζιρ} 33702	<u>PSBURG</u> Cour 25 (itry ISA	Zip 29 5 mme	30	ountry SAME		No
	9. Name and Add	ress of Current R			61 Name	10. Name and Address of New F	legistered Agent
	HOMAS J.	_			82 Street Add	ress (P.O. Box Number is Not Acceptal	Ne)
440 DA\	ENPORT AVE N				83		
ST. PFT	ersburg fl 33						
Pursuant to		ctions 607.0502 an			84 City bove-named corpo e corporation's boa	ration submits this statement for the pu ard of directors. I hereby accept the app	FL 85 Zip Code rpose of changing its registered offic continent as registered agent. I am
Pursuant to or,registerec fanjiliar with, GNATURE	the provisions of Se agent, or both, in t and accept the oble grature typed or printed ne	ctions 607.0502 an he State of Florida. igations of, Section	607.0505, Florida Statul Inte if applicable DIRECTORS	(NOTE Rugiste		ed when reinstaling)	FL prose of changing its registered offle continent as registered agent. I am DATE FICERS AND DIRECTORS IN 12
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