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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DEADY	Name				
REAUT	'-reddi, inc.			100000 00000000000000000000000000000000	
Principal Place	of Business	Mailing Address			iael aran aran ahan ahah aran Eran kesi
20 SOUTH DILLARD STREET P.O. BOX 771007 WINTER GARDEN FL 34777-1007		20 SOUTH DILLARD STREET P.O. BOX 771007 WINTER GARDEN FL 34777-1007		2. Data to conveyted as Qualified	3a. Date of Last Report
US		US		3. Date Incorporated or Qualified 05/08/1987	02/27/1995
. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
I I I I I I I I I I I I I I I I I I I		26		59-2828967	Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Oity 8 State		City & State		6. Election Campaign Financing	55.00 May Be
l		28		Trust Fund Contribution	Added to Fees
Ζφ]	Country 25	7 _{IP}	Country 30	8. This corporation has liability for in Florida Statutes X Yes	No
	9. Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New Re	egistered Agent
DITCUE	ODD IAMES AS				
	ORD, JAMES M. DILLARD ST.		82 Street Add	dress (P.O. Box Number is Not Acceptable	e)
	GARDEN FL 34787		83	,,	
			84 City		85 Zip Code
			Oity		FL S ZIP COOP
r. mursuam u	to the provisions of Sections 607.050	22 and 607 . 1506, Florida Statut	es, the above hamed corpo	oration soonits this statement for the purp	nose of custificial its redistrated out
familiar wit	th, and accept the obligations of, Sec	ction 607.0505, Florida Statutes	ed by the corporation's bo s.	ward of directors. I hereby accept the appo	intment as registered agent. I am
familiar wit IGNATURE 	th, and accept the obligations of, Sec Styrative typed or proted name of registered age	offen 607.0505, Florida Statutes	3. Dis. Registered Agent signature requi	vard of directors. I hereby accept the appo	DATE
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SIGNATURE:

2/21/96 (407)652-4897