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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J75357

(0)

THE PEANUT GALLERY, INC.

FILED Feb 18 1997 8:00am Secretary of State



	of Business	Mailing Addres	ss			-	*** ***** ***** *			*** #*#** ***	
327 5TH AVE N	О	•	1000 N TAMIAMI TRAIL								
791 TENTH STA NAPLES FL 339	REET SOUTH STE.B	201 Naples Fl 3410	12-5481								
US		US								te of Last Report 0/1996	
'	ace of Business	2a. Mailing Add	dress			4. FEI Num 59-28			d		Applied For
Suite, Apt.	# etc	Suite, Apt.	# etc			09.50	Jacon .				Not Applicab Additional
2	n, (76).	27	, 0.0.			5. Certifica	te of Status C	Desired			Required
City & State	9	City & State)			1	Campaign F	-	P3		May Be
7 _{ID}	Country	28		Country			nd Contributi	******	<u> </u>		d to Fees
ال الم	25	29	30	••• ₁	,	8. This corp			ntangible Yes [r s. 199.032,
	9. Name and Address of Cu					10. Name a					
SIES	KY, JAMES H.			81	Name	mes H	5165	k.			
	11TH STREET SOUTH			82	Street Addre	ess (P.O. Box N	lumber is No	ot Acceptabl	le)	۳	
	E 203				1000 T	AMIAM	Trail	Nort	4 50	itz a	701
NAPL	LES FL 33940-6777			83	1						
				84	City			****		85 Z	ip Code _
					City / Ap	163			<u>FL</u>		ip Code 3イルス
 Pursuant to office or re 	to the provisions of Sections 607 egistered agent, or both, in the S	'.0502 and 607.1508, Flo State of Florida, Such obs	rida Statutes,	the above	e-named corpo	oration submits	this stateme	ent for the pa	urpose of	changing Indent	g its registered
agent I ar	m familiar with, and accept the c	obligations of, Section 60	7.0505, Florid	la Statutes	s.	10119 000.00010	mootora, Tric	roby docop	t trib upp	Ja ig Hori	as regional
GNATURE .						····					
2.	Signature, typed or printed name of registere OFFICERS	ed agent and tille if applicable S AND DIRECTORS	(NOTE: R	legistered Age	ent signature require	ed when reinstating)	NS/CHANGE	S TO OFFIC	DATE FRS AND	DIRECT	OBS IN 12
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4. 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:

THE LINE OF PRINTED NAME OF SIGNING OFFICER OR

2-4-97

Daylime Phone #