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PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # J98992 (7)

FILED Feb 11 1997 8:00am Secretary of State

Principal Place of Business Mailing Address 5380 GULF OF MEXICO DR STE 105A STE 105A STE 105A LONGBOAT KEY FL 34228 Principal Place of Business Mailing Address \$380 GULF OF MEXICO DR STE 105A STE 105A LONGBOAT KEY FL 34228					3.	3. Date Incorporated or Qualified 3a. Date of Last Report					
							10/20/1987		02/2	7/1996	
	Place of Business	2a. Mailing	Address			4.	FEI Number			<u> </u>	pplied For
1		26		····			59-2851892				ot Applicabl
Suite, Apt	te 105		pt. #, etc. NTC 10	05		5.	Certificate of Status D	esired			Additional equired
City & Stat		City & S				- 6	Election Campaign Fir	nancino			May Be
3		28				"	Trust Fund Contributio				to Fees
Zip	Country	Zip		Counti	У	8.	This corporation has I				. 199.032,
4 .	25	29		30			Florida Statutes		Yes [
	9. Name and Address of Cu	irrent Registered Ag	jent	8	M	10.	Name and Address of	of New Reg	istered A	gent	
	IES, BURK L. JR.			°	Name						
	O GULF OF MEXICO DR			8.	2 Street Ac	ddress (P.O. Box Number is No	t Acceptabl	e)		
. –	. 105A IGBOAT KEY FL 34228			8:	3	···				· · · · · · · · · · · · · · · · · · ·	
LON	IUDUAI NEI FL 34220									·	
				84	4 City				FL	85 Zip	Code
						ornarati	no automita this stateme	nt for the n		changing i	ts registered
i1. Pursuant	to the provisions of Sections 607	.0502 and 607.1508,	Florida Statu	ites, the abor	ve-named co	orphon's	on submits this stateme board of directors. I he	rohy accont	tiha anor	intment ac	
	to the provisions of Sections 607 registered agent, or both, in the Sam familiar with, and accept the o	.0502 and 607,1508, State of Florida. Such obligations of, Section	Florida Statu change was i 607.0505, Fi	ites, the abo authorized t lorida Statute	ve-named co by the corpo es.	oration's	board of directors. I her	reby accept	t the appo	ointment as	regisiered
SIGNATURE	Signature, typed or printed name of registers	ed agent and tile if applicable		TE Registered A		equired whe	n reinstaling)		DATE		
SIGNATURE	Signature, typed or printed name of registers OFFICE:RS	od agent and tille if applicable AND DIRECTORS	e (NO	TE: Registered A	gent s-gnature re	equired whe			DATE	DIRECTOR	RS IN 12
SIGNATURE 12. IIILE	Signature, typed or printed name of registers OFFICERS	od agent and tille if applicable AND DIRECTORS		TE: Registered A	gent signature re	equired whe	n reinstaling)		DATE		
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I am an officer or director of the corporation or the receiver or trustee empowered of execute this report a required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

SIGNATURE: