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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K20403

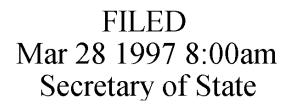
(7)

ALAMAGAN CORPORATION

Principal Place of Business Mailing Address

% STEPHEN A. FREEMAN

% STEPHEN A. FREEMAN





MIAMI FL 331:	. Key Dr. S-305 31	520 BRICKELL KEY DR. 1 MIAMI FL 33131-2607	5-30.5							
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			 Date Incorporated or Qualified 04/07/1988 		e of Last Report 5/1996			
2. Prinopat F	lace of Business	2a. Mailing Address				4. FEI Number			Applie	d For
21		26				59-2268319			Not Ap	oplicable
Suite, Apt #, etc. 2		Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired See Required				
Oity & Stat	· · · · · · · · · · · · · · · · · · ·	City & State				Election Campaign Financing Trust Fund Contribution			00 May	
Ζιρ	Country	Zçp	Co	untry		8. This corporation has liability for in	nlangible	tax unc	ler s. 19	9.032.
24	25	29	30			· · · · · · · · · · · · · · · · · · ·] No		
	g, Name and Address of Cu	rrent Registered Agent				10. Name and Address of New Reg	lstered /	gent		
FRE	EMAN, STEPHEN A.			81	Name					
	BRICKELL KEY DR			82	Stroot Add	ress (P.O. Box Number is Not Acceptable	lo)			
	TE 305			62	SHEET AUG	ress (r.o. Box Number is Not Acceptable	e)			
	MI FL 33131			83						·····
terior :	um 7 E 00 10 1				City			lee!	Zin Cod	
				84	City		FL	85	Zip Cod	10
agent La						poration submits this statement for the pi tion's board of directors. I hereby accep		ointmer	ntas reg	ıstered
46	Expertue typed or proceedings of the polari-	Jagentana to all suplicable (NO AND DIFFECTORS			nt signature requi	red when reinstating)	DATE EDC AND	DIDEC	TORCIN	1.40
12.	DP OFFICENS	ANO DIFF.CTORS DELETE	13.	IIILE		ADDITIONS/CHANGES TO OFFIC	ERS AND	Cha		Addition
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NAME	520 BRICKELL KEY DR			NAME						
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MM:				NAME						
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C 1Y St 24t	L			CITY - S		d to Section 119.07(3)(i) Florida Statutes	1 £ male a		7	

rear earcey carmy ear me information supplies with this tiling does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information independent or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath, that Larrian efficiency director of the corporation or the receiver or Justee 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 arguing of the with an address.

SIGNATURE:

305-324-3800