## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.

FILED AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.) Sep 22 1997 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State 1997 DIVISION OF CORPORATIONS DOCUMENT # (3) STARWISH ENTERPRISES, INC. Principal Place of Business Mailing Address C/O ROGER D. TRAVIS C/O ROGER D. TRAVIS 8003 S.W. 5TH AVE. 8003 S.W. 5TH AVE. GAINESVILLE FL 32007 DO NOT WRITE IN THIS SPACE GAINESVILLE FL 32607 3. Date Incorporated or Qualified 3a. Date of Last Report 10/12/1988 08/06/1996 2. Principal Place of Business 2a. Mailing Address 4 FEL Number Applied For 21 26 59-2966848 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. **\$8.75** Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Ee 6. Election Campaign Financing 23 П 28 Trust Fund Contribution Added to Fees Zio Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name travis, roger d. 8003 S.W. 5TH AVE. 82 Street Address (P.O. Box Number is Not Acceptable) GAINESVILLE FL 32607 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typod or printed name of registered agent and tille if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (4/97)DELETE TITLE 1.1 TITLE Change Addition TRAVIS, ROGER D. NAME 1.2 NAME 8003 S.W. 8TH AVE. STREET ADDRESS 1.3 STREET ADDRESS **GAINESVILLE FL** CITY - ST - ZIP 1.4 CITY-ST-ZIP TITLE DELETE 21 TITLE Change noitibtA NAME 22 NAME STREET ADDRESS 23 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE Change Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6 1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. 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. a