## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 OCCUMENT # MACCO

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2. Principal Place of Business 2a. Mailing Address 4. Fit humber 25 Sp28 17544  Soutc. Aprl #, clc 55 Sp28 17544  Soutc. Aprl #, clc 55 Sp28 17544  City & State 77 Country 77 C		
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City & State    City & State   City & State   City & State   City & State   City & State   City & Country   Zip   Country   Zip   Country   Zip   Country   Zip   Country   City & Country   City	\$8.75 Additional Fee Regulard	
Zip Country Zip Country Zip Country 8. This corporation has liability for interest and Address of Current Registered Agent 9. Name and Address of Current Registered Agent 10. Name and Address of New Re	\$5.00 May Be	
9. Name and Address of Current Registered Agent  HOLTON, SHEILA J. 3034 ATLANTIC AVE. EATON PARK FL 33840  11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the pury office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I thereby accept to agent it am familiar with, and accept the obligations of, Sections 607 0505, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICER  TIME  DHILL DELETE  11 TITLE  12 NAME  13 STREET ADDRESS  CITY-ST-2P  HILL DELETE  3 TIME  3 STREET ADDRESS  CITY-ST-2P  DELETE  4 TITLE  4 City  TITLE  DELETE  11 TITLE  12 NAME  3 STREET ADDRESS  CITY-ST-2P  DELETE  3 TIME  3 STREET ADDRESS  CITY-ST-2P  DELETE  4 TITLE  5 TIME  5 STREET ADDRESS  CITY-ST-2P  DELETE  5 TIME  5 STREET ADDRESS  6 STREET ADDRE	Added to Fees	
HOLTON, SHEILA J. 3034 ATLANTIC AVE. EATON PARK FL 33840  81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 City  11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose 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 agent Tam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.  SIGNATURE 12. OF FICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICEF 11 TITLE 12 NAME 13 STREET ADDRESS 14 ADDRESS 15 STREET ADDRESS 16 STREET ADDRESS 17 STREET ADDRESS 18 STREET ADDRESS 19 STREET	Yes No	
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Signature   Lyminic product name of registrous agond and other il applicable   (NOTE Registrous agond uproduce required whom reinstating)	FL 85 Zip Code	
HOLTON, SHEILA J.   1.2 MAME     3214 IOWA ROAD     1.3 STREET ADDRESS     1.4 CITY-ST-ZIP		
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STREET ADDRESS 6.3 STREET ADDRESS		
OTY-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 information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal e	I further certify that the	

**FILED** 

Apr 14 1997 8:00am

Secretary of State

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