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

PROFIT CORPORATION ANNUAL REPORT

1007



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 14 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

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DOCUMENT # K54125

(5)

Principal Place of Business 333 FALKENBURG RD N SUITE 8-214 TAMPA FL 33819	Mailing Address  333 FALKENBURG RD N SUITE B-214 TAMPA FL 33619-7892			166 <b>166 166</b> 166 166 1	
			3. Date Incorporated or Qualified 12/16/1988	3a. Date of Last Re 05/21/1996	aport
2. Principal Place of Business	26. Mailing Address		4. FEI Number		plied For
1	26		59-2920714		t Applicabl
— Suite, Apt. #. etc. ⊒1	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 #	
2 City & State	City & State		6. Election Campaign Financing	\$5.00	<del></del>
3	28		Trust Fund Contribution	Added t	
Zip Country	Zip	Country	6. This corporation has liability for it		199.032,
9 Name and Address	29 of Current Registered Agent	30	Florida Statutes  10. Name and Address of New Reg	Yes No	
BULLERMAN, LYNNE S.	or outlant riograturos Agent	81 Name	10. 110110 0110 71010 07 1017 1101	TOTAL PARTY	
333 FALKENBURG RD N SU	ITTE B-214	82 Street Add	ress (P.O. Box Number is Not Acceptab	lo)	
TAMPA FL 33619			ress (F.O. Box Number is Not Acceptab		
		83			
		84 City		85 Zip (	Code
<ol> <li>Pursuant to the provisions of Sections office or registered agent, or both, in agent. I am familiar with, and accept</li> </ol>	007 0700 4 007 4500 51 14 001			FL  °   z	
SIGNATURE	MOTI	F: Senistered Agent signature requi	dred when reinstaling)	DATE	
SIGNATURE Signature, typed or painted name of n  OFFI	CERS AND DIRECTORS	E: Registered Agent signature requi	ited when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRECTOR Change	
SIGNATURE Signature, typed or ju alad name of a life.  OFFI  DEF P	CERS AND DIRECTORS			ERS AND DIRECTOR	
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SIGNATURE Signature, typied or jointed name of recording to the control of the co	CERS AND DIRECTORS  DELETE  B. 1 B-214	13. 1.3 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		ERS AND DIRECTOR  Change	Addilii
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SIGNATURE AND TYPEO OR PRINTED NAME OF BIONING OFFICEN OR DIRECTOR

CORATOR

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