FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sariora B. Mortham

1996			Secretary of State DIVISION OF CORPORATIONS			
	JMENT #	K54293	(1)			
1, Corporation	on Name NETH M. MYER C	.P.A. P.A.	` '			
	The triple of	46 1 46			1 1888 AND 1881 AND 1888 AND 1881 AND 1	i da
Principal Plac	ce of Business		Mailing Address			
C/O KENNETH M. MYER			C/O KENNETH M. M	YEO		
3890 WILS	HIRE CIRCLE		3890 WILSHIRE CIRC	LE		
SAHASUTA	A FL 34238-2559		SARASOTA FL 34238	÷2559	3. Date Incorporated or Qualified	3a. Date of Last Report
					12/19/1988	04/25/1995
2. Principal F	Place of Business	2a 26	. Mai'ing Address		4. FEI Nomber 65-0096033	Applied For
Suite, Apt.	. #, etc.		Suite, Apt. #, etc.		03 0090033	Not Applicable
22		27			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Star	ite	==1	City & State		6. Election Campaign Financing	5.00 May Be
23 Zip	Count	28	Zip	Country	Trust Fund Contribution	Added to Fees
24	25	29		30	8. This corporation has liability for Florida Statutes	intangible tax under s. 199.032, ⊱ □ No
	9. Name and Addi	ess of Current Regis	stered Agent		10. Name and Address of New I	Registered Agent
MVED	, Kenneth M.			81 Name		
	WILSHIRE CIRCLE			82 Street Ac	ddress (P.O. Box Number is Not Acceptal	vie)
	SOTA FL 34238-2559			83		······································
				84 City		···
				- ''		FL 85 Zip Code
11. Pursuant or registe	: to the provisions of Sec ered agent, or both, in th	tions 607.0502 and 60 e State of Florida. Suc	97.1508, Florida Statut h change was authoriz	es, the above named corp ed by the corporation's bo	poration submits this statement for the purposer of directors. Thereby accept the app	rpose of changing its registered office
	wth, and accept the oblig	ations of, Section 607	.0505, Florida Statutes	3.	cya,	the registered agent rain
SIGNATURE	Signature, typed or printed name			tts: Registered Agent signatur req.	alled whose remodering	DATE
12. Tille	Б	OFFICERS AND DIREC		13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
NAMé	MYER, KENNETI	н м.	DELETE	1 1 TITLE 12 NAME		Change C Addition
STREET ADDRESS	3890 WILSHIRE			1.3 STREET ADDRESS		
CITY+S1+ZIF	SARASOTA FL			1.4 OF Y ST-ZIP		
Jul'6			☐ DELFTE	2 1 TITLE		☐ Change ☐ Addition
NAME SELECT A AUGUSTON				2.2 NAME		
STHEET ACORESS OUT STIZE				2.3 STREET ADDRESS		
Tr1 _E	· · · · · · · · · · · · · · · · · · · ·		DELFIE	2.4 CITY - ST - ZIP 3.1 THLF		Change Addition
MME.				3.2 NAME		F average Wateriers
STREEL ADDRESS				3.3 STREET ADDRESS		
CITY-S1-ZIF TITLE				3.4 CITY - S1 - 719		
NAME			DELE 16	4 1 TITLE 4 2 NAME		Change Addition
STHEET ADDRESS				4.3 STREET ADDRESS		
CITY-ST-ZIP				4 4 0 11 Y - \$1 - 20F		
JULI E			DELFTE.	5 1 TITLE		Change Addition
NAM!				5.2 NAME		
STREET ADDRESS CITY-ST-ZIF				5.3 STPEET ADORESS		
THE			DELETE	5.4 CHY-ST-ZIP 6.3 TITLE		Change Addition
NAME				6.2 NAME		
STREET ADDRESS						1
CITY-SI-ZIP				6.3 STREET ADDRESS		

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 12 if changed, or on an attachment with an address.

SIGNATURE:

3-29-96 941-158-4389