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**Feb 18 1997 8:00am
Secretary of State**

**PROFIT CORPORATION
ANNUAL REPORT
1997**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K59415 (5)

1. Corporation Name
OSHCO, INC.



Principal Place of Business Mailing Address
**3600 N.W. 82 AVE
P.O. BOX 20816
MIAMI FL 33166**

3. Date Incorporated or Qualified **01/19/1989** 3a. Date of Last Report **03/04/1996**
4. FEI Number **38-2853268** Applied For Not Applicable
6. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent

**HERRON, JAMES M.
3600 NW 82ND AVE
MIAMI FL 33102-0816**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 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 typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	DT	<input type="checkbox"/> DELETE
NAME	GING, MARY	
STREET ADDRESS	3600 NW 82ND AVE	
CITY-ST-ZIP	MIAMI FL	
TITLE	VSD	<input type="checkbox"/> DELETE
NAME	BRUMMER, ARLENE	
STREET ADDRESS	3600 NW 82ND AVE	
CITY-ST-ZIP	MIAMI FL	
TITLE	BY	<input checked="" type="checkbox"/> DELETE
NAME	FINNEY, GRAY P.	
STREET ADDRESS	3600 NW 82ND AVE	
CITY-ST-ZIP	MIAMI FL	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	BAYNE, BEVERLY	
STREET ADDRESS	3600 NW 82 AVE	
CITY-ST-ZIP	MIAMI FL	
TITLE	P	<input type="checkbox"/> DELETE
NAME	WHITMER, DONN B	
STREET ADDRESS	3600 NW 82 AVE	
CITY-ST-ZIP	MIAMI FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	VP
3.3 STREET ADDRESS	ROBERT D. FATOVIC
3.4 CITY-ST-ZIP	3600 NW 82 AVENUE MIAMI, FL 33166
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
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.

SIGNATURE: **Mary K. GING** DATE: **2-6-97** (305) 500-3137
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (9/96)

7/01/96

OSHCO, INC.
(Florida)

OFFICERS

DONN B. WHITMER
ARLENE BRUMMER
ROBERT D. FATOVIC
MARY GING
BEVERLY BAYNE

PRESIDENT
VICE PRESIDENT & SECRETARY
VICE PRESIDENT
TREASURER
ASSISTANT SECRETARY

DIRECTORS

ARLENE BRUMMER
ROBERT D. FATOVIC
MARY GING

3600 N. W. 82nd AVENUE
MIAMI, FLORIDA 33166