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 DOCUMENT # K81526

(1)

FILED

May 01 1997 8:00am

Secretary of State

Principal Place of Business Mailing Address										
630 N. DIXIE FREEWAY NEW SMYRNA BEACH FL 32168-8466 NEW SMYRNA BEACH FL 32168-8466										
							3. Date incorporated or Qualified 04/19/1989		ite of Last)1/1996	
2. Principal Plac	e of Business	}	2e. Mailing Address			4. FEI Number		Applied For		
1 Suite Apt #	etc.		Suite, Apt. #, etc.				59-2944796			Not Applicable Additional
2		27					5. Certificate of Status Desired			Required
City & State		City & State					6. Election Campaign Financing Trust Fund Contribution			0 May Be d to Fees
3	Country	Zip		Cou	ntry	····	8. This corporation has liability for			
	25 29		30				Florida Statutes Yes No			
Mai CO	9, Name and Address of Curren	t Registered A	gent		81.	Name	10. Name and Address of New Ro	gistered	Agent	
WILSON, OSCAR W., JR. 630 N. DIXIE FREEWAY					82	·	Idress (P.O. Box Number is Not Acceptable)			
	MYRNA BEACH FL 32069					Glibe: Addi	ess (r.o. box reulfiber le reot Accepta	UIG)		
					83					
					84	City	······································	FL	85 Zi	p Code
2.	gratier - typied or purited name of registered age OFFICERS AND			13.		nl signature requir	ed when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CERS AND		
1)P		DELETÉ	1.1 1					Chang	e Addition
	VILSON, OSCAR W., JR. 130 N. DIXIE FREEWAY			1.2 N/ 1.3 S1		ADDRESS				•
	IEW SMYRNA BEACH FL			1,4 CI						
DT.F	President:		DELETE 2.1 F				Change _			e 🔲 Addition
TAME STREET ADORESS	TONY RITURA 630 N. DIXIE- THU SMYRNA B	9 t /l George	. ,	22 N		ADDRESS				
CIBY-ST ZIE	MIUI SMURUA B	FACK Y	32168	- 1		ST-ZIP				
ITLE	,		DELETE	3 1 TI	TLE				Change	e 🔲 Addition
MAME STREET ADDRESS				3.2 N		ADDRESS		V- 1		
DITY - ST - ZIP						ST-ZIP				
HELF			DELETE	4 1 TI			40111		Chang	e Addition
NAME				4.2 N		1000100				
STREET ADDRESS				4.3 S		ADDRESS T-ZIP				
i'if			DELETE	5 1 TI			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Change	e Addition
EM!				5.2 N		130000				
STREET ADDRESS				1		ADDRESS T-ZIP				
MIT			DELETE	61 TI		1-411	A		Change	e Addition
NAME				6.2 N						
STREET ADDRESS				1		ADDRESS				
Cify-S:-Zif- 14. I do horeby	certify that the information supplies	d with this filing	does not qual	6.4 C	exe	mption stated	in Section 119.07(3)(i), Florida Statuti	es. I furthe	r certify th	at the
information i Lagn an offic	indicated on this annual report or s	upplemental an the receiver or	nual report is trustee empoy	true and a vered to e	accu	rate and that	my signature shall have the same leg t as required by Chapter 607, Florida	al effect as	s if made i	under oath; th