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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

	JAL REPORT 1997	2.7	Secretary of State DIVISION OF CORPORATIONS				Secretary of State			
1. Corporation	MENT # K84332 Car, inc.	2 (1)	1313				c sactors dal servi direg single state such		í S láki 1901	
Principal Place 18514-A US HW CLEARWATER F	ry. 19-N	Mailing Address 18514-A US HWY, 19-N CLEARWATER FL 34624-2764								
							3. Date incorporated or Qualified 05/01/1989	3a. Date of Last 04/08/1996	Report	
2. Principal Place of Business 2a. Mailing Addr 21 26							4. FEI Number 59-2945864		Applied For	
Suite, Apt	#, etc	Suite, Apt. #, etc.	Suite, Apt. #, etc.				5, Certificate of Status Desired	□ \$8.75	Additional Required	
City & State	1	City & State	├──┐ ´				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
7ф 24	Country 25	25 29 30				untry 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No				
g Name and Address of Current Registered Agent RAY, JAMES J.					Name		10. Name and Address of New Re	gistered Agent		
18514 A US HWY 19 N Clearwater Fl 34824				82 83	Street A	ddres	s (P.O. Box Number is Not Acceptat	ole)		
					City	<u></u>		- 85 Zij	Code	
Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the a office or registered agent, or both, in the State of Florida. Such change was authorize agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Sta					-	corpor	ation submits this statement for the p	FLI		
agent La	m familiar with, and accept the oblig	gations of, Section 607.0505, Flo	rida Sta	tutes	s.	UIARO	is board or directors. Thereby acce	or the appointment a	s registered	
	Signative hyperoles printed hards of registered as	····		d Age	int signature r	required	when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE	DC IN 12	
12 .	OFFICERS AND DIRECTORS DPT DELETE			13.			ADDITIONS/CHANGES TO OFFIC	Change		
NAME	RAY, JAMES J.			1.2 NAME						
SIREFT ADDRESS	18514-A US HWY 19N		1.3 STREET ADDRESS							
City-St-ZiP	CLEARWATER FL			1.4 CITY - ST - ZIP						
TitLE	S DELETE			21 TITLE				☐ Change	Addition	
NAME	BEAUDRY, FRANCES		22 N	AME	Ì					
STREET ADDRESS	18514-A US HWY 19N		235	TREET	ADDRESS					
City - St - ZiP	CLEARWATER FL			HY-9	ST-ZIP					
TITLE	DELETE			3.1 TITLE				☐ Change	Addition	
NAME			3.2 N	AME						
STREET ADDRESS			3.3 S	TREET	ADDRESS				ļ	
CHTY+ ST - ZIP			3,4. (HY-9	ST-ZIP					
TITLE	☐ DELETE			4.1 TITLE			***************************************	☐ Change	Addition	
NAME			4.21	IAME						
STREET ADDRESS			43 S	TREET	ADDRESS					
CHTY - ST - ZIP	1 PTT		440	ITY-S	T-ZIP				-	
TITLE		☐ DELETE	5.1 T	TLE	I			Change	Addition	
NAME.			5.2 N	AME	1					
STREET ADORESS			53 S	TREET	ADDRESS					
CITY-ST-ZIP			5.4 0	ITY - S	T-ZIP					
1)TLF		☐ DELETE	6.1 T	TLE				☐ Change	Addition	
NAME .			6.2 N	AME						
STREET ADDRESS			63 S	TREET	ADDRESS					

64 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(3Xi), 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 a placement with an address.

SIGNATURE:

Mar. 17, 1997 (813) 535-3000

FILED

Apr 02 1997 8:00am