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

FILED May 12 1997 8:00am Secretary of State

ii Garizora	JMENT # K8633 Y DEVELOPMENT GROUP, (, , , , , , , , , , , , , , , , , , ,			ÁDAN DIRK 1984 BURN BURN DIRK JERÚ
Principa' Pl	lace of Business	Mailing Address			DARK BARK KODI KODI DAK DIKA TAK
839 EAST PARK AVE 839 EAST PA		839 EAST PARK AVE			
STE C STE C			ana.		
TALLAHASS	SEE FL 32901	TALLAHASSEE FL 32301-0	NU2	3. Date Incorporated or Qualified	3a. Date of Last Report
				05/08/1989	08/29/1996
2. Principa	al Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	al H sis	26 Suita Ant # ato		59-2957260	Not Applicable
₁	pt #, étc.	Suite Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
22 City & St	tiate	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Ζφ 24	Country 25	Zip 29	Country 30	8. This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032,] Yes 🏻 No
	9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Re	jistered Agent
	KELLY, RUSSELL J		81 Name		
_	839 EAST PARK AVE			ress (P.O. Box Number is Not Acceptab	le)
_	STE C		83		
Ta	'ALLAHASSEE FL 32301				
			84 City		FL 85 Zip Code
SIGNATUR	Signature, typed or parited name of registered	agent and title if applicable (NOTE AND DIRECTORS	Registered Agent signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRECTORS IN 12
THE	DP	DELETE	1.1 TITLE		Change Addition
NAME	KELLY, RUSSELL J		1.2 NAME		
STREET ADDRES	3749 SHAMROCK WEST TALLAHASSEE FL		1.3 STREET ADDRESS	•	
City - ST - ZIP TITLE	DVS	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME	KELLY, CATHERINE M		2.2 NAME		<u>.</u>
STREET ADDRES			2 3 STREET ADDRESS		
City-St-79	TALLAHASSEE FL		2.4 City-St-ZIP		
Tillf	DT CAROLINE A	DELETE	3.1 TITLE		Change Addition
NAME Emilia de Aponia	KELLY, CAROLINE A		3.2 NAME		
STREET ADORES	S 3749 SHAMROCK WEST TALLAHASSEE FL		3.3 STREET ADDRESS 3.4. CITY-ST-ZIP		
1011 1011	INCOMETE	☐ DELETE	4.1 TITLE		Change Addition
NAME:			4. 2 NAME		
STREET ADORES	8		4.3 STREET ADDRESS		•
CITY - S1 - ZIP			4.4 CITY-ST-ZIP		
THEF		☐ DELETE	5 1 TITLE		Change Addition
NAME France Language	ré.		52 NAME		
STREET ADORES	55		5 3 STREET ADDRESS		
CITY - \$1 - 20F		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
NAME		bear	6.2 NAME		water to the second of the sec
STREET ADDRESS	58		6.3 STREET ADDRESS		
C(TY+S1-7IP			6.4 CITY-ST-ZIP		
14. I do ne	reby certify that the information supp	lied with this filing does not qualify	y for the exemption state	d in Section 119.07(3)(i), Florida Statutes	I further certify that the

14. I do nereby 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 comporation 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 Brick 13 if changed, or on an attachment with an address.

SIGNATURE:

OUR ERUSSELL J. KELLY, PRESIDENT

0048980