## FILE NOW: FILING FEE AFTER MAY 1 IS \$550,00

PROFIT CORPORATION ANNUAL REPORT

1997

NAME

STREET ADDRESS



FLORIBA DEPARTMENT OF STATE

Sandra 🗣. Mortham

Secretary-of State
DIVISION OF CORPORATIONS

DOCUMENT # K95976

(2)

FACT EN	NTERPRIS	ES, INC.	·							
Principal Plac	e of Business	<u> </u>	Mailing Addr	ross	<del></del>			<u> </u>		
C/O DWIGHT S. ROSENBARGER 2903-A 29TH AVE. E. BRADENTON FL 34208			C/O DWIGHT S. ROSENBARGER 2903-A 29TH AVE. E. BRADENTON FL 34208-7442							
							<ol> <li>Date Incorporated or Qualified 06/13/1989</li> </ol>		e of Last R 5/1996	eport
2. Principal Place of Business			2a. Mailing Address			4. FEI Number		<u> </u>	oplied For	
Suite, Apl. #, etc.			Suite, Apt. #, etc.			65-0125991		<del> ! - !</del>	ot Applicable	
22			<u> </u>	27			5. Certificate of Status Desired		<b>φο./</b> 5 /	Additional equired
City & State			City & State				6. Election Campaign Financing		\$5.00	May Be
23			28				Trust Fund Contribution		Added 1	
Ζip		Country	Zip		Country	Y	8. This corporation has liability for			. 199.032,
24		25	29		30		Florida Statutes		No	
500		and Address of Currer	it Registered Age	nt	81	Name	10. Name and Address of New F	registered A	Jent	
	SENBARGEN 2 FRUITVILLI	, DWIGHT S.								
	ASOTA FL (			8			Address (P.O. Box Number is Not Acceptable)			
OMIN.	ASOIA FL	14240			83	<b> </b>				
					0.4	Oite			Tam 1 7: -	Ondo
					84	City		FL	85 Zip (	Code
11. Pursuant office or ragent. La	to the provision registered ago am familiar wit	ons of Sections 607.050 ont, or both, in the State h, and — → the oblig	2 and 607,1508, F of Florida. Such c allogs of, Section €	lorida Statute hange was a 507.0505, Flo	es, the abov authorized b rida Statute	e-named co y the corpor s.	rporation submits this statement for the ation's board of directors. I hereby acc	purpose of c ept the appoi	hanging it intment as	s registered registered
SIGNATURE	Signature, typed i	and beneficient to mo struck	on: and title if applicable	NOTE	: Registered An	ont signature reg	uirea when reinstating)	DATE		
12.			D DIRECTORS	(10-1	13.	on, angeres e rea	ADDITIONS/CHANGES TO OFF		DIRECTOR	S IN 12
TITLE	P			DELETE	1.1 TITLE				Change	Addition
NAME		rger, dwight s.			1.2 NAME					
STREET ADDRESS	7952 FRU				1.3 STREET	T ADDRESS				
CITY-ST-ZIP	SARASOT	A FL		l pri exc	1.4 COY-5	S1-7/P			7.0	1.400
TITLE	1		<u> </u>	DELETE	2.1 1/TLF	}		L	Change	Addition [
NAME					2.2 NAME					
STREET ADDRESS						I ADDRESS				
CITY-ST-ZIP TITLE				DELETE	2. 4 CITY- 3 1 TITLE	S1-ZIP			Change	Addition
NAME	<b>\</b>				3 2 NAME				0.161.80	
STREET ADDRESS						r ADDRESS				
CITY-ST-ZIP					3 4. CITY-	ST-ZIP				
TITLE				DELETE	4.1 TITLE				Change	Addition
NAME	)				4. 2 NAME	}				
STREET ADDRESS					4.3 STREET	T ADDRESS				
CITY-ST-ZIP			·	1 Actions	4.4 CITY-5	ST-ZIP			7.0	1 2 200
TITLE			L.	DELETE	5.1 TITLE		<b>8000022:</b> -07/14/97010	3671	-1 €gange	Addition
NAME .					5.2 NAME		-07/14/97010	30502	1	
STREET ADDRESS						ADDRESS	***550.00			
CITY-ST-ZIP TITLE	<del></del> -			DELETE	5.4 City - 5 6.1 Title	51 - ZIP		т	Change	Addition

84 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 2 if changed or on an attachment with an address.

6.2 NAME

hala 600740 -00

**FILED** 

Jul 11 1997 8:00am

Secretary of State