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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 **DOCUMENT # 1 05865**

(5)

FILED May 08 1997 8:00am Secretary of State

Principal Place of Business Mailing Address 407 COLORADO AVE STUART FL 34994 US Mailing Address Mailing Address CHARLES KISELA 407 COLORADO AVE STUART FL 34994 US				3. Date Incorporated or Qualified 3a. Date of Last Report				
	ace of Business	100			08/01/1989 4. FEI Number	04/	25/1996	
21 Protopar Pr	ace or dusiness	2a. Mailing Address		65-0436199	Applied For Not Applicable			
Suite Apt	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 A	***
City & State	}	City & State			Election Campaign Financing Trust Fund Contribution		\$5.00 Added to	
Z (p	Country	28 Zip	Countr	У	8. This corporation has liability for	intangible	e tax under s.	
24	25 9. Name and Address of Curre	29 Anna Arent	30		Florida Statutes 10. Name and Address of New Re		No Adent	
4270	LA, CHARLES CAMROSE LN. T PALM BEACH FL 33417		81 82 83	Street Add	ress (P.O. Box Number is Not Acceptat	ble)	85 Zip (Code
SIGNATURE	7 H M M S Soprature type in a printed name of registered as	15ELA	- 10 M A A A	AFAAA	poration submits this statement for the plants board of directors. I hereby accelled the reinstating ADDITIONS/CHANGES TO OFFICE	DATE	- 97	
TITLE NAME	P CHARLES	DELET	4.4 7074.5		ADDITIONS/OFFARIOLO TO OFFI	OLITO HIV		OHTIE
STREET AFIDRESS	KISELA, CHARLES 4270 CAMROSE LN. WEST PAI M REACH FL 3341	DELETE	1	T ADDRESS	ADDITIONS OF ANALOVO OF TA	OLINO PINI	Change	Addition
STREET AFORESS CITY-ST-ZIP TITLE NAME STHEET ADDRESS	4270 CAMROSE LN. WEST PALM BEACH FL 3341 V KISELA, THOMAS 914 DICKENS PL.	7	1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STREE	T ADDRESS T ADDRESS	ADDITIONS OF ANALOVO OF THE	CLERO PITAL	Change	
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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 or director 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.