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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

1. Corporation Name L13055

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|--|--|---|--|--|---|---|-------------------------|-------------------------------------|--|
| rincipal Place of Business<br>% ROBIN E. ROBERTS<br>504 TERRACE HILL DR<br>TEMPLE TERRACE FL 33617   |  | Mailing Add   | Mailing Address % ROBIN E. ROBERTS 504 TERRACE HILL DR TEMPLE TERRACE FL 33617 |  | f 1001016 04) (1002 1111 00101 01101  | . etti aiğii atan   |                         | 3.0 1001                            |  |
|  |  | 504 TERRA   |  |  |   |   |                         |                                     |  |
|  |  | TEMPLE T  |  |  | 3. Date incorporated or Qualified 09/01/1989                                      |   | of Last Rep<br>/20/1995 |                                     |  |
| Principal Place  | of Business  | 2a. Mailing   | Address  |  |   | 4. FEI Number 59-2971673  |                         | <u> </u>                            | plied For<br>at Applicable                   |
| Suite, Apt. #, 6   |  | 26 Suite, A   | Apl. #, etc.   |  |   | 5. Certificate of Status Desired  |                         |                                     | Additional<br>equired                        |
|  |  | 27 Cily 8.5   | Ptotr.   |  |   | 6. Election Campaign Financing  |                         |                                     | May Be                                       |
| City & State   |  | 28  |  |  |   | Trust Fund Contribution   |                         |                                     | to Fees                                      |
| Zip  | Country  | Zφ  |  | Country  | •   | 8. This corporation has liability for Florida Statutes                            | rintangibleta<br>is ∐No | ax under s                          | 199.032,                                     |
| . <u></u>  | 25   | 29 <br>s of Current Registered A  | aent   | 30   |   | 10. Name and Address of New   |                         | Agent                               |  |
|  | g. Name and Address  |   | <u> </u>   | 81   | Name  |   |                         |                                     |  |
| ROBERTS,   | ROBIN E.   |   |  | 82   | Street Addr   | ess (P.O. Box Number is Not Accepta   | able)                   |                                     |  |
| 504 TERRACE HILL DR  |  |   | 83   |  | 1   |   |                         |                                     |  |
| TEMPLE 1   | ERRACE FL 33617  |   |  | 84   | City  |   | FL                      | <b>85</b> Zip                       | Code   |
|  |  |   |  |  |   | ation submits this statement for the p<br>rd of directors. I hereby accept the ap | wassa of ob             | enging its re                       | egistered offi                               |
| or registered<br>familiar with,  | , and accept the outgatts  Igrature types or printed name of | reg shared agont and title 1 angle: illile  |  | iOTE: Rug stored Ap  | ent signature recurre   | d when resistating!   | DATE<br>EDICERS ANI     | D DIRECTO                           | RS IN 12                                     |
| or registered<br>familiar with<br>SIGNATURE<br>si  | , and accept the outgatts  Igrature types or printed name of | reg shared agreet and title if adjuict like   |  | acite: Rug stared Ap   |   | I when revisibility?  ADDITIONS/CHANGES TO O                                      | FFICERS AN              | D DIRECTO                           | RS IN 12                                     |
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SIGNATURE:

Paris Paris Printed NAME OF SIGNING OFFICER OR DIRECTOR