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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 08 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L13055

(3)

SIGNATURE:

Principal Place	OBERTS		Address E. ROBERTS ACE HILL DR				
504 TERRACE HILL DR TEMPLE TERRACE FL 33617 TEMPLE TERRACE FL 33617 TEMPLE TERRACE FL 33617				17-3850			1.6.
						 Date Incorporated or Qualified 09/01/1989 	3a. Date of Last Report 04/11/1996
	lace of Business		ig Address			4. FEI Number 59-2971673	Applied For Not Applicable
Suite, Apt.	# etc	26 Suite	, Apt. #, etc.				¢0.75 Additional
22		27	, ,			5. Certificate of Status Desired	Fee Required
City & State	D .	City 8	State			6. Election Campaign Financing	\$5.00 May Be
23	Country	28 Zip		Countr		Trust Fund Contribution	Added to Fees
Ζιρ 24	Country 25	29		30	У	This corporation has liability for Florida Statutes	r intangible tax under s. 199,032,
<u> </u>	9. Name and Address of Curre		Agent	1901		10. Name and Address of New R	
	erts, robin e.			8	Name		
	TERRACE HILL DR			6:	Street Add	dress (P.O. Box Number is Not Accepta	ıble)
TEM	PLE TERRACE FL 33617			8:			
					'		
				8-	4 City		FL 85 Zip Code
11. Pursuant office or reagent. La	to the provisions of Sections 607.05 egistered agent, or both, in the Sta m familiar with, and accept the obli	02 and 607.150 e of Florida. Su- gations of, Sect	08, Florida Statu ch change was ion 607.0505, Fl	tes, the abo authorized t lorida Statuti	ve-named co by the corpora es.	rporation submits this statement for the ation's board of directors. I hereby according	purpose of changing its registered apt the appointment as registered
SIGNATURE	Signature, typed or printed name of registered a	gent and title if applic	able. (NO	TE Flegislered A	gent signature req	uired when reinstating)	DATE
12.		NO DIRECTORS		13.		ADDITIONS/CHANGES TO OFF	
T1"LE	D DODESTA DODING F		DELETE	1.1 TITLE			Change Addition
NAME	Roberts, Robin E. 504 Terrace Hill Dr			1.2 NAME	- E		
STREET ADDRESS	TEMPLE TERRACE FL				ET ADDRESS		
CHY-ST-7IP TITLE			DELETE	1.4 CITY - 2.1 TITLE			Change Addition
NAME			_	2.2 NAMI		,	1
STREET ADDRESS				2.3 STRE	ET ADDRESS		
City-St-7iP		 		2.4 CITY		<u> </u>	1 A
THE			☐ DELETE	3.1 TITLE	i		Change Addition
NAME				3.2 NAMI			
STREET ADDRESS				3.3 STRE 3.4. CITY	ET ADDRESS		
CHY-ST-ZIF THLE			DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME				4. 2 NAV	ie		
STREET ADDRESS				4.3 STRE	ET ADDRESS		
CHY-\$1-Z0:				4.4 CITY			T Observed To Addition
IITLE			DELETE	5.1 TITLE			Change Addition
NAME				5.2 NAM			
STREET ADDRESS					ET ADDRESS		
CHTY+ST+ZiF TITLE			DELETE	5.4 CITY 6.1 TITLE			Change Addition
NAME				6.2 NAM			- ***
STREET ADDRESS					ET ADDRESS		

64 City-SY-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 Brock 12 or Block 13 if changed, or on an attachment with an address.