COF	PROFIT RPORATION JAL REPORT 1997		Sandra (Secreta	RTMENT OF STATE B, Mortham ary of State CORPORATIONS	Apr 24 1 Secreta	1997 8: ary of S	
LAWPH(Principal Plac	INE ISLAND ROAD	SERVICE Mail	(7) IS, INC. ING Addross SOUTH PINE ISLAN ITATION FL 33324-44				
					3. Date Incorporated or Qualified 10/31/1989	3a. Date of Last 07/08/1996	Report
	ace of Business	<u>⊢</u> _¬	Aailing Address		4. FEI Number 52-1653990		pplied For lot Applicabl
Sulte, Apt.	#, elc.	⊢ı	Suite, Apt. #, etc.		5. Cerlificate of Status Desired	\$8.75	Additional
2) City & Stat	3	<u>⊢</u> _1	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00	Required D May Be I to Fees
Zip	Country	28 Z	(ip	Country	8. This corporation has liability for	r intangible tax under	
4	25 9. Name and Address of Currer	29 nt Registe	red Agent	30	Florida Statutes 10. Name and Address of New R	Yes No Negistered Agent	
120 PLA	Corporation System) S. Pine Island Road NTATION FL 33324			83 84 City	ddress (P.O. Box Number is Not Accepte	FL 85 Zip) Code
120 PLA	5 S. PINE ISLAND ROAD NTATION FL 33324 to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the oblig			82 Street Ad 83 84 City 16s, the above-named c authorized by the corpor lorida Statutos.	orporation submits this statement for the ration's board of directors. I hereby acce	FL 85 Zip purpose of changing ept the appointment a	
120 PLA 11. Pursuant office or r agent. I a SIGNATURE 12.	b S. PINE ISLAND ROAD NTATION FL 33324 to the provisions of Sections 607.056 egistered agent, or both, in the State m familiar with, and accept the oblig Stenature, typed or printed name of registered age OFFICERS AN	jent and jitle if a	applicable. (NO OHS	82 Street Ad 83 84 City	orporation submits this statement for the ration's board of directors. I hereby acce	FL 85 Zip purpose of changing ept the appointment a DATE ICERS AND DIRECTO	its registore s registored RS IN 12
120 PLA 11. Pursuant office or r agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS	b S. PINE ISLAND ROAD NTATION FL 33324	jent and jitle if a	spokcable. (NO	B2 Street Ad B3 B4 City Ides, the above-namedic authorized by the corporation of the authorized by the corporation of the corporation of the statutos. 12. Hogistored Agent signature re 13. 1.1 IITLE 1.2 NAME 1.3 STREET ADDRESS -	orporation submits this statement for the ration's board of directors. I hereby acco quired when reinstating)	FL 85 Zip purpose of changing ept the appointment a DATE	its registore s registored RS IN 12
120 PLA 11. Pursuant office or r agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	b) S. PINE ISLAND ROAD NTATION FL 33324	jent and jitle if a	applicable. (NO OHS	82 Street Ad 83 B4 City B4 City City Ices, the above-namedic authorized by the corporation of the corporatin	orporation submits this statement for the ration's board of directors. I hereby acco quired when reinstating)	FL 85 Zip purpose of changing ept the appointment a DATE ICERS AND DIRECTO	Its registored s registored RS IN 12
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120 PLA	b) S. PINE ISLAND ROAD NTATION FL 33324	jent and jitle if a	aronoatric. (NO ORS DELETE	82 Street Ad 83 B4 City B4 City City Ites, the above-namedic authorized by the corporation of the corporating	orporation submits this statement for the ration's board of directors. I hereby acco quired when reinstating)	FL 85 Zip purpose of changing ept the appointment a DATE ICERS AND DIRECTO Change	Its registere s registored RS IN 12 Addition
120 PLA 11. Pursuant office or r agent. I a SIGNATURE 12. TITLE NAME	b) S. PINE ISLAND ROAD NTATION FL 33324	jent and jitle if a	applicatife: (NO ORS DELETE DELETE	82 Street Ad 83 B4 City B4 City City Ites, the above-namedic authorized by the corporation of the corporating	orporation submits this statement for the ration's board of directors. I hereby acco quired when reinstating)	FL 85 Zip purpose of changing ept the appointment a DATE ICERS AND DIRECTO Change	Its registere s registored RS IN 12 Addition