FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

COF	PROFIT REPORATION JAL REPORT 1996	Sandra Secreta	RTMENT OF STATE B. Mortham ary of State CORPORATIONS		
DOCU 1. Corporation	MENT # L413	83 (5)			
1 '	ETT-U-PULL-IT, INC.				
				1 (8 8)(8)2 6)3 8 (1 8)18(1 3) 360 1((8) 30)	FA RYIS BIBIS ASBIS BEBRI BIBIS BIBIS ASBIS INDA
Principal Place of Business Mailing Address C/O DONALD R. VIOLETT C/O DONALD R. VIOLE 2218 SHIRAH ROAD 2218 SHIRAH ROAD AUBURNDALE FL 33823 AUBURNDALE FL 3382				Date Incorporated or Qualified	3a. Date of Last Report
2 Principal Pl	ace of Business	77		01/04/1990	03/10/1995
21 Philopai Pi	ace of Business	2a. Mailing Address		4. FEI Number 59-3083668	Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Electron Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30	This corporation has liability for inf Florida Statutes Yes	angible tax under s. 199.032,
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Re	
2218 5	tt, donald R. Shirah Road Rndale Fl 33823		83	ress (P.O. Box Number is Not Acceptable	
			84 City		85 Zip Code
SIGNATURE	Worsald R. Uiod Signature, typed or printed name of registered agent	and tire I applicable. PRes	the above-named corpord by the corporation's board Destroy Registered Agent signature requires	ž Wtven reinst (hng)	2-22-96
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
NAME STREET ADDRESS CITY-ST-ZIP	VIOLETT, DONALD R. 2218 SHIRAH ROAD AUBURNDALE FL	☐ DELETE	1. 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP		Change Add-tion
TITLE NAME STREET ADDRESS	D VIOLETT, YVONNA H. 2218 SHIRAH ROAD	☐ DELETE	2 1 TITLE 2 2 NAME 2 3 STREET ADDRESS		☐ Change ☐ Addition
CITY-ST-ZIP	AUBURNDALE FL		2.4 CITY - ST - ZIP		
TITLE NAME		DELETE	3 1 TITLE		Change Additron
STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS		
CITY - ST - ZIP			3.4 City - S1 - 2ip		
TITLE		☐ DELETE	4. 1 TITLE		Change Add tion
NAME:			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-S1-ZIP		F1 62:	4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5 1 TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS			5.2 NAME		
CITY-SI-ZIP			53 STREET ADDRESS		
TITLE.		DELETE	54 CITY-SI-7IP		
NAME		- Otter	6.2 NAME		☐ Change ☐ Addition
STREET ADDRESS			6.3 STREET ADORESS		
CITY-ST-ZIP			6.4 City - ST-ZIP		

14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 cath; 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.

SIGNATURE: DONALD R. VIOLETT DONALD KU

3-22-96 941-665-8299