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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

FILED Jan 28 1998 8:00am Convotory of State

	1998		DIVISION OF C	CORPORATI	ONS	Secretary	01.2	iaie		
1	ii (taiii)	45318	(7)							
KID KA	M' IIAO.						DIĞIL BIBLI BIBL)		
Principal Plac	e of Business	Ma	iling Address			(1001/01) 01/ 01091 01/00 1/101 1/001 1/01/ 010/1 010/1		// B1811 1341		
11610 S CLEVELAND FT MYER FL 33907			11610 S CLEVELAND FT MYER FL 33907							
US	33 5 Q1		US			DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualified				
a Principal P	lace of Business	120	Mailing Address			01/25/1990 4. FEI Number		pplied For		
21	index or Eddings	26	maxing recorde			65-0189535	_ 	ot Applicable		
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional		
22		27	City & State					equired		
City & State	в	28	City & State			6. Election Campaign Financing Trust Fund Contribution		May Be to Fees		
Zip	Count		Zip	Countr	y	a. This corporation owes or has paid the cur				
24	25	29		30		Personal Property Tax due June 30.	Yes [No No		
		ess of Current Regist	ered Agent		1	10. Name and Address of New Registered	Agent			
	LER, CAROL			81	Name					
11610 S CLEVELAND FT MYER FL 33907					Street Ac	ddress (P.O. Box Number is Not Acceptable)	ress (P.O. Box Number is Not Acceptable)			
					 					
					03			0.11		
				84	City	FL	85 Zip	Code		
11. Pursuant	to the provisions of Sec	ctions 607.0502 and 60	7.1508, Florida Statute	es, the abov	e-named co	orporation submits this statement for the purpose o ration's board of directors. I hereby accept the app	changing it	ts registered		
agent. I a	m fa miliar with, and ac	cept the obligations of	Section 607.0505, Flo	orida Statute	s.	rations board of directors. Thereby account the app	OH HE HOLL AS	10gistorou		
SIGNATURE	Clonetive hand or existed pen	ne of registored agent and title i	Paralle ANOTE	Spaintared As	ool o grahun ro	quited when reinstating) DATE				
12.		OFFICERS AND DIREC		13.	eni signature re-	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	RS IN 12		
TITLE	P		DELETE	1.3 TITLE			Change	Addition		
NAME	MILLER, RAYMON			1.2 NAME	1					
STREET ADDRESS	5376 COLONY C			I.	ADDRESS			Į;		
CITY-ST-ZIP	CAPE CORAL FL VS	33904	DELETE	1.4 CITY-1	ST-ZIP		☐ Change	Addition		
TITLE NAME	MILLER, CAROL		C) Dittell	2.1 TITLE 2.2 NAME	1		- Change	L_ Addition		
STREET ADDRESS	5376 COLONY C	T			I ADDRESS					
CITY-ST-ZIP	CAPE CORAL FL			2. 4 CITY -						
TITLE			☐ DELETE	3.1 TITLE			Change	Addition		
NAME				3.2 NAME						
STREET ADDRESS				•	ADDRESS					
CITY-ST-ZIP TITLE			DELETE	3.4. CITY- 4.1 TITLE	ST-ZIP		Change	Addition		
NAME				4. 2 NAME	į		Can onlings	rwanon		
STREET ADDRESS				4.3 STREET	ADDRESS					
CITY-ST-ZIP				4.4 CITY - S	ST - ZIP]		
TITLE			DELETE	5.1 TITLE	- 1	 	Change	Addition		
NAME				5.2 NAME						
STREET ADDRESS				5.3 STREET						
CITY-ST-ZIP TITLE			☐ DELETE	5.4 CITY - S 6.1 TITLE	ST-ZIP		Change	Addition		
NAME			<i>pecet</i>	6.2 NAME			— ∧uning			
STREET ADDRESS				6.3 STREET	ADDRESS					
CITY-ST-ZIP				6.4 City-5		,				
	ertify that the information	on supplied with this fil	ing does not qualify for			in Section 119.07(3)(I), Florida Statutes. I further ce	rtify 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 picciver 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 anadoress.