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PROFIT CORPORATION ANNUAL REPORT

1997

STHEET ADDRESS

CITY - ST- ZIP



FLORIDA DEPARTMENT OF STATE

FILED

May 27 1997 8:00am

Secretary of State

8134492100

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L50650

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| 1. Corporance | rt Nasog | ` ' | | | } | | | |
|--|---|---------------------------|---------------------------|---------------------------------------|--|--|-----------------------------------|-------------------------|
| C.A.C., | INC. | | | | e kodinani dan Buni dana dana dana dana da | ini BiBio BiBik Bir | 014 818 14 818 14 7 | |
| | | | ···· | T | | | | |
| Principal Place of Business Mailing Address | | | | | (LEGATIBLE BOT BALLE BETTE MITEL BILLE OF | it mimte miles art | TSI MENI MININ | AMIL SMAL |
| 611 E DRUD SUITE 302 611 E DRUD SUITE 302 CLEARWATER FL 34616 CLEARWATER FL 34616-3982 | | | | | | | | |
| | | | | | Date Incorporated or Qualified 02/12/1990 | | te of Last Re 2/1996 | port |
| , Principal F | lace of Business | 2a, Mailing Address 26 | · | | 4, FEI Number 59-2993448 | | | plied For t Applicab |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | | \$8.75 A | \dditional | |
| t] - City & Stat า | 6 | City & State | | · · · · · · · · · · · · · · · · · · · | 6. Election Campaign Financing | <u> </u> | \$5.00 | May Be |
| Zip | Country | 28 Zip | Country | | Trust Fund Contribution 8. This corporation has liability for | r intangible t | Added to tax under s. | |
| 1 | 25 9. Name and Address of Curre | 29 | 30 | | | Yes 🗀 |] No | |
| HUC | GHES, DWIGHT C. | The transfer out a gold | 81 | Name | 10, trans and readings of from t | iogisto.ou z | gont | |
| 672 POINSETTIA RD | | | 82 | Street Add | ress (P.O. Box Number is Not Accept | able) | | |
| #11 BELLEAIR FL 34616 | | | | | *************************************** | ······································ | | |
| | | | | City | | | 85 Zip (| Code |
| Fi | 507.05 | 00 4 007 4E00 E1 | | | poration submits this statement for the tion's board of directors. I hereby acc | FL | | |
| SIGNATURE | Signature, typed or printed name of registered ag | | | ent signature requi | red when reinstating) | DATE | | |
| 2. IILF | DITICERS AN | ID DIRECTORS DELETE | 13. | | ADDITIONS/CHANGES TO OFF | | Change | S IN 12 |
| AM? | HUGHES, DWIGHT C. | E.J. OLELY | 12 NAME | i | | ' | - Sumage | |
| TREET ADDRESS | 672 POINSETTIA RD #11 | | 1.3 STREET | ADDRESS | | | | |
| ITY - ST - ZIP | BELLEAIR FL | | 1.4 CITY - S | | | | | |
| T.E | S | ☐ DELETE | 2.1 TITLE | | | | Change | Additi |
| AME. | HUGHES, EMILY | | 2.2 NAME | | | | | |
| IREET ADDRESS | 672 POINSETTA RD #11 | | 2.3 STREET | ADDRESS | | | | |
| TY - ST - ZIP | BELLEAIR FL | | 2.4 CITY- | ST-ZIP | | | | F 1 |
| III me | | DELETE | 3.1 TITLE | | | . I | Change | Additi |
| AMÉ ROCCE ADDOLOGIA | | | 3.2 NAME | ADDRECC | | | | |
| AREET ADORESS HTY-ST-ZIP | | | 3.3 STREET 3.4. CITY - | | | | | |
| TLF | ļ | DELETE | 4.1 TITLE | 217 211 | | | Change | Addili |
| AME | | | 4 2 NAME | | | , | - | |
| THEFT ADDRESS | | | 4.3 STREET | ADDRESS | | | | |
| HY-\$1-216 | | | 4.4 CITY - S | T-ZIP | | | | |
| i) LE | | | 5.1 TITLE | | | | Change | Additi |
| AME | | | 5.2 NAME | | | | | |
| TREET ADDRESS | | | 5.3 STREET | ADDRESS | • | | | |
| HY-SI-ZIP | | | 5.4 CITY-S | 1-ZIP | | | | |
| lit (F | | DELETE | 6.1 TITLE | 1 | | | Change | Additi |
| NAME | 1 | | 6.2 NAME | l | | | | |

6.3 STREET ADDRESS

6.4 CITY - ST- ZIP

14. The hereby certify that the information supplied with this filing does not quality 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 Block 12 or Block 13 if changed, or on an attachment with an address.

611 E. DRUID, SUITE 302 CLEARWATER, FL 34616 PHONE (813) 449-2100 FAX (813) 449-2121

MAY 19, 1997

TO: THE DEPARTMENT OF STATE

I'M ENCLOSING MY FILING FEE OF \$165.00 FOR THE 1997 PROFIT CORPORATION ANNUAL REPORT.

THE REASON IT IS BEING SENT IN NOW IS BECAUSE BOTH MY WIFE AND I HAVE BEEN OUT OF THE UNITED STATES SINCE FEBRUARY, AND WHEN WE DID RETURN, IT WAS AS AN EMERGENCY DUE TO HER MOTHER'S DEATH. WE CAN PROVIDE DOCUMENTATION (PASSPORTS ETC.) SHOWING WE WERE OUT OF THE COUNTRY, AS WELL AS A DEATH CERTIFICATE IF YOU NEED IT.

WE REQUEST WAIVER OF THE PENALTY BECAUSE IT WAS SIMPLY IMPOSSIBLE TO SEND IT WHEN WE WERE NOT HERE.

DWIGHT HUGHES