PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

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9011 ST. ANDRI	EWS WAT		P.O. (BOX 1047								
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22			27					5. Certificate of Status Desired		Fee F	Required	_}
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14. I 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 ennual report or supplemental annual report is true and accurate and that my signature shall have the same legal affect 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 attempted with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED MAINE OF SIGNING OFFICER OR DIRECTOR

04/29/99

352-383-6200

Date

Daytime Phone 8

FILED
May 10, 1999 8:00 am
Secretary of State
05-10-1999 90145 033 ***150.00