PROFIT CORPORATION ANNUAL REPORT 1996			TER MAY 1 IS \$225.00 FLORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State DIVISION OF CORPORATIONS			
DOCUI 1. Corporation		L62749	(1)			
·	ENTERPRISE, IN	C.				IN AND RIGH BORD REGISTER STREET
Principal Place	of Business	 Mai	ing Address			
913 S.W. LN Palm city US	GHTHOUSE DRIVE FL 34990	F	13 S.W. LIGHTHOUSE ALM CITY FL 34990 IS	DRIVE		
•					3. Date Incorporated or Qualified 03/30/1990	3a. Date of Last Report 05/01/1995
2. Principal Pla 21	ace of Business	2a. 1 26	Mailing Address		4. FEI Number 65-0188812	Applied For Not Applicable
Suite, Apt	#, etc.	27	Suite Apt #, etc		5. Certificate of Status Desired	\$8.75 Additional
City & State	!		Dity & State	···································	Election Campaign Financing Trust Fund Contribution	Fee Required \$5.00 May Be
Zip 24	Count 25			Country	This corporation has liability for Florida Statutes Yes	intangible tax under s 199.032,
		ress of Current Registe	red Agent	81 Name	10. Name and Address of New I	Law
11. Pursuant to or registere familiar with SIGNATURE	h, and accept the oblig	tions 607,0502 and 607, e State of Florida Such o ations of, Section 607,06	mange was authorizer i05, Florida Statutes.	83 84 City It the above named corporation's boat the corporation's boat the corporation's boat the corporation's parameter expension and the corporation of the corp	ration submits this statement for the pured of directors. I hereby accept the app	PATE 85 Zip Code rpose of changing its registered office continuent as registered agent. I am
12.	D	OFFICERS AND DIRECT		13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
NAME STREET ADDRESS CITY-ST-ZIP	ENO, RICHARD 913 S.W. LIGHT PALM CITY FL		E DITTE	1 1 TITLE 12 NAME 13 SIREET ADDRESS		Change Addition
TITLE	D	<u> </u>	DELETE	2 1 TITLE		Change Addition
NAME STREET ADDRESS CITY-ST-ZIF	ENO, KEN-LING 913 S.W. LIGHT PALM CITY FL			2.2 NAME 2.3 STREET ADDRESS 2.4 OUY-ST-ZIP		
TITLE			DELETE	3 1 Tifle		Cnange Addition
STREET ACORESS				3.3 STREET ADDRESS		
CITY - ST - ZIP TITLE			DELETE	3.4 GHY+S1+ZIP 4.1 HTLF		Change Addition
NAME				4.2 NAME		
STREET ADDRESS				4.3 STREET ADDRESS 4.4 CITY ST-ZIP		
CITY - ST - ZIF TITLE			DELETE	5 1 THILE		Change Addition
NAME				5 2 NAME		
STREET ADDRESS CITY - ST - ZIP				5.3 STREET ADDRESS 5.4 CHY - ST - ZIP		
TITLE NAME STREET ADDRESS			DELETE	6 1 TITLE 62 NAME 63 STHEET ADDRESS	· · · · · · · · · · · · · · · · · · ·	☐ Change ☐ Addition
City-St-ZiP 14. Ldo hereby	certify that the information	ation supplied with this fit	ng is voluntarily furns	64 CITY - ST- ZIP hed and does not qualify fo	or the exemption stated in Section 119	07(3)(x). Ekgrida Statutes I further
contifu that	the information indicate	ed on this annual report o	or supplemental annua	Il report is true and accura	te and that my signature shall have the	same legal effect as if made under
oath; that I	ani an officer or directi	or of the corporation or t fichanged, or on an arra	ne receiver or trustee.	empowered to execute thir as	s report as required by Chapter 607, Fi	orida Statutes; and that my name

CR2E034 (12/95)