SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 29 1997 8:00am
Secretary of State

	UMENT retion Name /FORREST,	# L77444 INC.	(2)								
Principal Place of Business Mailing Address								T KREMINEN OM NORM LØKIN ØKINK ØKINK		LONG!! EIEN GEDN DIGN	OTERA DADIK ADDA
8498 RIDGEWOOD AVENUE 8498 RIDGEWOOD AVENUE											
SUITE 2202 SUITE 2202							:				
CAPE CANAVERAL FL 32820 CAPE CANAVERAL FL 3282					20			DO NOT V	VRITE	IN THIS SPACE	
US			U\$				Γ	3. Date Incorporated or Qual	ified	3a. Date of Las	t Report
								06/04/1990		04/30/199)6
2. Principal Place of Business			2a, Mailing Address				4. FEI Number		⊢	Applied For	
21 Suite, Apt. #. etc.			Suite, Apt. #, etc.				54-1101063			Not Applicable	
22]			27				5. Certificate of Status Desire	d	1 1	5 Additional	
City & State			City & State							Required	
23			28				Election Campaign Financi Trust Fund Contribution	ng		O May Be	
Zip	Country				Country				on nair	7,000	
24	25		29 30					8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ✓ Yes ☐ No			
	g, Name	and Address of Current I	Registered Agent					IO. Name and Address of Ne			
	FORREST, AA				81	Name					
8498 RIDGEWOOD AVENUE					82	Street	Address	(P.O. Box Number is Not Acc	ontable	<u> </u>	
SUITE 22 02						Oli COI I	1001000	, (1 . 0 . 0 0 x 11amber 13 140(7100	opiaon		
CAPE CANAVERAL FL 32920					83						
					84 City			,,		- 85 Z	ip Code
11 Pursuant to the provisions of Sections 607 0502 and 607 1509 Elevido Statutos						e namad	0010010	tion authorite this statement for	the n	FL 65 2	- 14
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE											
12.		OFFICERS AND (D DIRECTORS			13.		ADDITIONS/CHANGES TO C	OFFICE	RS AND DIRECTO	ORS IN 12
TITLE	COOR	T 440F0 04001 NE	☐ DELETE	1.1 TI	TLE					☐ Chang	e 🔲 Addition
NAME	CADE CAMAMEDAL EL			1.2 N	1.2 NAME 1.3 STREET ADDRESS						
STREET ADDR				1.3 S							
CITY-ST-ZIP	CAPE	ANAVERAL FL				ST - ZIP					
TITLE			☐ DELETE	2.1 TI		1				☐ Chang	e 🔲 Addition
NAME	700				2.2 NAME						
STREET ADDRI	ess					2.3 STREET ADDRESS					
CITY-ST-ZIP	51-28		DELETE		2. 4 CITY - ST - ZiP 3.1 TITLE					Chang	n Addition
NAME			<u></u>		3.2 NAME					Change	e L Addition
	ET ADDRESS			3.3 STREET ADDRESS		ADDRECC					
CITY-ST-ZIP						ST-ZIP					
TITLE			DELETE	4.1 TI		31-21				Change	e Addition
NAME			_	4. 2 N							
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CITY-ST-ZIP				4.4 CF							
TITLE			DELETE	5.1 10						Change	e Addition
NAME				5.2 NA	ME						
STREET ADDRE	SS			5.3 ST	reet	ADDRESS					
CITY-ST-ZIP				5.4 CI	Y-5	T- Z(P					ļ
TITLE			DELETE	6.1 T/T	LE					☐ Change	Addition
NAME	(C) \$75	$\mathcal{T}^{1}(\chi_{1,\ldots,n})=n$		6.2 NA	ME	- 1					
STREET ADDRE	1			6.3 ST	REET	ADDRESS					
CITY-ST-ZIP	25			6.4 CI	ry-s	T-ZIP					

4. I do 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 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.

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