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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # 1 00

141

FILED Feb 19 1997 8:00am Secretary of State

Principal Plac		4506 L.B. I P.O. BOX	Mailing Address 4506 L.B. MCLEOD RD., SUITE F P.O. BOX 53-6576 ORLANDO FL \$2853-6578			3. Date Incorporated or Qualified 06/19/1990 3a. Date of Last Report 04/17/1996				
2. Principal F	Principal Flace of Business Suite, Apt. #, etc.		28. Mailing Address 26 Suite. Apt. #, etc.			4. FEI Number	4		 	pplied For
						59-3016281			Not Applica S8.75 Additional	
	.,	27				5. Certificate of Sta	atus Desired	Ш		lequired
City & Stat	e	City &	State			6. Election Campa	ign Financing		\$5.00	May Be
		28				Trust Fund Cont	tribution			to Fees
Zip	Country	Zip		Country	1.	8. This corporation				s. 199.032,
<u> </u>	9. Name and Address of	[29]	- ne	30		Florida Statutes 10. Name and Add		Yes		
A		Current Registered A	igent	81	Name	10. Name and Add	Test of New P	odisteten	Våaur	·
	3GS, STEPHEN, P 3 L.B. MCLEOD RD., SUITI	t t							· · · · · · · · · · · · · · · · · · ·	
	ANDO FL 32811	E F		82 3	Street Addres	ss (P.O. Box Number	is Not Accepta	able)		
VIII.	MIDO LE GEGLI			83						
				-			·		85 Zip	Code
					City .					
	to the provisions of Sections 6 registered agent, or both, in the miliar with, and accept the			Ites, the above-r authorized by the lorida Statutes.		·	atement for the s. I hereby acce		_ ^	its registered s registered
ignature 2.	Signature, typical or printed name of regu		ble. (NO	Ites, the above-rauthorized by the lorida Statutes. ITE: Registered Agent	named corpo he corporatio	·		purpose of the app	of changing pointment a	RS IN 12
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reconnectory certary that the information supplied with this filling 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 furstee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 17 if changed, or on an ayanimphit with an address.

SIGNATURE: