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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L84332

(0)

FILED Feb 10 1997 8:00 am Secretary of State

LUPO IN	C .					
Principal Place of Business Mailing Addres C/O A. JOHN HUGHES JR., ESO. C/O A. JOHN H 2121 MCGREGOR BLVD. 2121 MCGREGO FORT MYERS FL 33901 FORT MYERS FL		BLVD.	2.			
					3. Date Incorporated or Qualified 06/29/1990	3a. Date of Last Report 02/06/1996
2. Principal P	lace of Business	2a. Mailing Addr	ess		4. FEI Number 65-0206395	Applied For Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #,	etc.		Certificate of Status Desired	\$8.75 Additional
City & State	Δ	City & State				Fee Required
23	v	26			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Z∙p	Country	Zip	 3	Country	8. This corporation has liability for in	ntangible tax under s. 199.032, Yes 🛣 No
24	9. Name and Address of Curre	29 ent Registered Agent	30		Florida Statutes 10. Name and Address of New Reg	
2121	HES, A. JOHN JR. MCGREGOR BLVD. T MYERS FL 33901			81 Name 82 Street Addr 83 84 City	ess (P.O. Box Number is Not Acceptab	QE Zin Code
11. Pursuant office or ragent 1 a	to the provisions of Sections 607.06 registered agent, or both, in the Starm familiar with, and accept the obli	02 and 607.1508, Florid te of Florida, Such chan galions of, Section 607.	la Statutes, the ge was autho 0505, Florida	ne above-named corporation of the corporation of th	oration submits this statement for the pion's board of directors. I hereby accep	urpose of changing its registered at the appointment as registered
	Signature, typed or printed name of registered a			stered Agent signature require	ed when reinstaling) ADDITIONS/CHANGES TO OFFIC	DATE
12.	D OFFICERS A	ND DIRECTORS		1.1 TITLE	ADDITIONS/CHANGES TO OFFIC	Change Addition
NAME	HUGHES, A. JOHN JR.			1.2 NAME		
STREET ADDRESS	2121 MC GREGOR BOULEVA	RD		1.3 STREET ADDRESS		
CITY - ST - ZIP	FORT MYERS FL			1.4 CITY-ST-ZIP		
TITLE		DE	LEYE	2.1 TITLE		Change Addition
NAME			Ì	22 NAME	9000020	183533-004 /97-0168-004 3.75 ****173.75
STREET ADDRESS				23 STREET ADDRESS	-02/11/	/97U1056004 3.75 ****173.75
CITY - ST - ZIP		DE		2 4 CITY - ST - ZIP	****1(
TOLE		Dt		3 1 TITLE		Change Addition
NAME CTOLL ADOPTED				3 2 NAME 3.3 Street address		
STREET ADDRESS CITY - ST - ZIP				3.4 CITY - ST - ZIP		
TITLE		DE		4.1 TITLE		Change Addition
NAME				4. 2 NAME		
STREET ADDRESS				4.3 STREET ADDRESS		
CITY-ST-ZIP				4.4 CITY - ST - ZIP		
THE		☐ DE		5.1 TITLE		Change Addition
NAME				5.2 NAME		
SIREET ADDRESS				5.3 STREET ADDRESS		
CITY - ST - ZIP				5.4 CITY-ST-ZIP		_
TITLE		☐ D€		61 TITLE		Change Addition
NAME				6.2 NAME		74X V2/
STREET ADDRESS		$\overline{}$		6.3 STREET ADDRESS		~ rollh
		<u> </u>				U/16.

14. I do hereby certify that the information supplied with his tiling 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 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 proposer of the corporation of the corporation

SIGNATURE:

MONATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #