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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # L92375

(9)

	ENTERPRISES, INC.	Mailing Address			
6419 NEWE	Berry Rd.	P.O. BOX 140277			
- PO-DOX-10	575	- PO BOX 8575	<u></u>		
US	LE FL 32605	GAINESVILLE FL 3261 US	14	3. Date Incorporated or Qualified	3a. Date of Last Report
				08/06/1990	05/01/1995
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt.	# ato	26		59-3024252	Not Applicat
Jone, Apr.	π, 6ιο.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & Stati	te	City & State			Fee Required
1		28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Country	Zip	Country	This corporation has liability for	Added to Fees
	25	29	30		s 🔲 No
<u> </u>	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New I	Registered Agent
211 N.	HENRY L. JR. 15. 157 ST. SMILLE-EL 32601		83	Ames E (A) To ress (P.O. Box Number is Not Acceptal 1 ST 7 (RST A)	N Digi JANUE
	4	/	84 City	AINESUILLE	FL 85 Zip Code 9260/
familiar wit	ith, and acceptate obligations of Sec	rica. Sucarchange was aur ionzi	ed hy the comparation's bos		9 9 - 9 - 1 - 9 - 1
IGNATURE _	Agnature, typed or printed name of registered age:	nt and title if applicable (NO	TE Fregistered Agent signature require	ration submits this statement for the pured of directors. I hereby accept the app	Dontment as registered agent. I am
GNATURE _	Agnaturu, typed or printed namic of registered age OFFICERS AI	ont and title if any 4 pable (NO ND DIRECTORS	TE Fegistered Agent signature require	dweng Courts	CERS AND DIRECTORS IN 12
GNATURE _	OFFICERS AN	nt and title if applicable (NO	71 Fragistered Agent signature require 13.	dweng Courts	7 S/1/16
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certify that the information indicated on this annual report or expolemental annual report is true and accurate and that my signature shall have the same legal effect as if made under appears in Block 12 or Block 12 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OB PRECTOR

124/96 352-331-03