FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

	•	al REPC 1 997	HI		Secretary of State DIVISION OF CORPORATIONS				Secretary of State					
		MENT : Name TO JR., II		9	(0)									LIAN (AL)
Pr	Principal Place of Business Mailing Address										OLUBI DAHAD HIKOD ILKAD EDU	J EULU BULU D	1911 BIBII 14011	
1341 RIDGEWOOD AVENUE 1341 RIDGEWOOD AVENU HOLLY HILL FL 32117-2319 HOLLY HILL FL 32117-231														
mu	OLT MILL PL	32117-2318		HOL	LI PRUL PL 32117-23	119								
										01/25/198			te of Last Re 16/1996	eport
	Principal Pla	ace of Busine	985	\vdash	Mailing Address					4. FEI Number 59-2861				plied For
21	Suite, Apt. #	t, etc	· .	26	Suite, Apt. #, etc.		 -	· · -	+				\$8.75	t Applicable
22				27						5. Certificate o	f Status Desired		Fee Re	
23	City & State			28	City & State					6. Election Car Trust Fund (npaign Financing Contribution		\$5.00 Added t	
	Zip		Country	\vdash	Zip		Country				ntion has liability for		_	199.032,
24			5 and Address of Curre	nt Registe	red Acent	30				Florida Statu	ites L Address of New Re		No	
	DANI	O, CARMIN		in registe	ieo Agein		81	Name		IU, Maine and I	Address Of New Me	gistoros A	Ague	
		BULL DRIVE					00	Chast	A ol ols	- /D.O. Day N	ber is Not Acceptal			
			H FL 32019				82	Sueet	Address	s (P.O. box Nun	iber is Not Acceptal	JI O)		
							83							
							84	City					85 Zip (Code
44	Duramont la	the provisi	ons of Sections 607.05	02 and c0	7 1EOR Florido Stut	ton th	o phou		d oornor	ation aubmita thi	a statement for the	<u> </u>	shanging it	n replatered
''	office or re	gistered age	int, or both, in the Stati	e of Florida	 Such change was 	author	rized by	the cor	rporation	ation submits the	stors. I hereby ac ce	pt the appo	changing id bintment as	registered
CIV	•	n iamiliar wit	n, and accept the obliq	gations of,	Section 607 0505, r	lorida	Statutes	i.						
511	GNATURE _	Signature typed o	printed name of registered as	jent and title if	applicable (N0	H Rege	stered Age	int signature	re required y	when reinstating)		DATE		
12		ND	OFFICERS AN	ND DIRECT			13.		1.4		CHANGES TO OFFIC			
111		DP DANIO, CA	ADMINE		DELETE		I.1 TITLE			265)			Change	☐ Addition
NAI	ME REET ADORESS		SEWOOD AVENUE				1.2 NAME 1.3 STREET	ADDDECC	DA	NIO, JOHA	WOODAVE	•		
} `	Y-ST-ZIP	HOLLY HI					i a city . S		14	111/4/60	, FL 3211	7		
T-TI		DT			DELETE		1 TITLE	1 - ZIF	(550	=)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Change	Addition
NAI	ME	DANIO, RO	OSE C.			. 2	2.2 NAME		50	Sin KLIZA	BETHA.			
STF	REET ADDRESS		EWOOD AVENUE			2	2.3 STREET	ADDRESS	134	11 12/1260	DOOD AVE.			
CI1	Y-ST-ZIP	HOLLY HI	<u>L FL</u>			2	2. 4 C(TY	ST-ZIP	Ha	UY HILL	, FL 32117			
TITI	LE	DS	W.B.I. 6		DELETE		3.1 TITLE						Change	Addition
NAI		DANIO, JO	SEWOOD AVENUE				3.2 NAME							
	IEET ADDRESS	HOLLY HI					3 STREET							
TITE	Y-S1 7/P	110tt III			DELETE		3 4. CITY - : 1.1 THLE	51 - ZIP					Change	Addition
NAI	- 1						1. 2 NAME							
	IFFT ADDRESS					- 1	4.3 STREET	ADDRESS						
CIT	Y-ST-ZIP						1.4 C(TY - 5	T-ZIP						
1111	l E				☐ DELETE		i.1 TITLE						Change .	☐ Addition
NAI							5.2 NAME							
	REET ADDRESS							ADDRESS						
CIT	Y - ST - ZIP				DELETE		5.4 CITY - S 6.1 THILE	1 - ZiP	 				Change	Addition
NAI	[**************************************	- 1	5.2 NAME		1					
	REET ADDRESS							ADDRESS						
									1					

14. I do hereby certily 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 13 if changed, or on an attachment with an address.

SIGNATURE: JOHN DAN/O

2/13

904-672-6573

FILED

Feb 18 1997 8:00am