## FILE NOW: FILING FEE AFTER MAY 1 IS

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTA Sandra B. M

> Secretary of S DIVISION OF CORPORA

1996

DOCUMENT # M68294

(1)

1. Corporation Name

GENERAL SUPPLIES OF CANAVERAL, INC.

Principal Place of Business	Mailing Address						

ONS

Suite, Apt. #, etc.  27  City & State  City & State  Zip  Country  Suite Apt. #, etc.  Suite Apt. #, etc.  5. Cert/licate of Status Desired Fee Required  Fee Required  6. Election Campaign Financing Trust Fund Contribution: Added to Fees  Added to Fees  7/p  Country  8. This corporation has liability for intangible tax under s 199.032,	399 CHALLEI PORT CANA	NGER ROAD VERAL FL 32920	399 CHALLENGER F PORT CANAVERAL							
Supplementary   Supplementar						3. Date Incorporated or Qualified 02/15/1988				
Suito, April	2. Principal Plac	ce of Business	2a. Mailing Address			4. FEI Number	+ · · · · · · · · · · · · · · ·			
27	21					3972070343				
28	Suite, Apt. #.	etc.	27	·			Fee Required			
28			├─ <sub>1</sub> '			1				
SOLEAU, JOHN L   1970 MICHIGAN AVENUE   197	<b>23</b>	Country		Countr		Trost rund Contribution Added to Fees				
SOLEAU, JOHN L 1970 MICHIGAN AVENUE COCON FL 32923   80   Street Address IP C. Box Number is Not Acceptable;   Sole	24	<b>├</b> ┐ '	<u> </u>	<del>-</del>	,					
SOILEAU, JOHN L				1						
1370 MICHGAN AVENUE				81	Nanie					
R3				82	Street Addr	ress (P.O. Box Number is Not Acceptat	ole;			
The Parameter to the provisions of Sections 607 6509 and 607, 1508 Florests. Statutos, the above named corporation's submits this statement for the purpose of changing its registered agent. I am registered agent, or both, in the State of Fioriss. Such change was sudhicitized 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, Funds Statutos.  SIGNATURE    DEFECTION   DEFECT				83	<u> </u>					
The Pressant to the provisions of Socious 607 0502 and 607 1508. Honds Statutes, two above named corporation's submit this statement for the purpose of changing its registered agent. I am registered agent, or both, in the State of Fonds, Socious 607 0505, Funds Statutes, two above named corporation's board of directors. I hereby accept the appointment ar registered agent. I am registered agent. I am statement to the purpose of changing its registered agent. I am statement are specified agent. I am statement to the purpose of changing its registered agent. I am statement are registered agent. I am statement are specified agent. I am statement are registered agent. I am statement are specified agent. I am statement are described agent. I am statement are specified agent. I am s				84	l City		85 Zip Code			
or registered agent, or both, in the State of Fonds, Such change was authorized by the corporation's board of arector's Thereby accept the application as registered agent, and accept three obligations of Section (2017, Section (2017, SECTION)). Section (2017, SECTION)    Section (2017, SECTION)   13.					<u> Lii</u>		<b>FL</b>			
12	or registere familiar with	d agent, or both, in the State of Florid	la. Such change was authori	ized by the cor	poration's boa	ration scientify this statement for the pourd of directors. Thereby accept the app	ointment as registered agent. Fairi			
TITLE	Sid-tatione.				ent signature recurse					
NAME   PANDYA, SUMANT   315 N TROPICAL TRAIL3   13 SIREFI ADDRESS   14 CITY ST-ZIP		OFFICERS AND				ADD/TIONS/CHANGES TO OF				
STREET ADDRESS		DANDVA SIMANT			ļ		Contaings.			
MERRITT ISLAND FL					į					
TILE										
NAME   STREET ADDRESS			□ DELETE				☐ Change ☐ Addition			
STREET ADDRESS   MARRITT ISLAND FL										
MARRITT ISLAND FL										
DELETE   DELETE   3   TITLE   Change   Addition	. ·						į			
NAME			DELETE				Change Addition			
STREET ADDRESS   33 STREET ADDRESS   34 CITY-ST-ZIP				3.2 NAMI						
CITY-ST-ZIP	l i			3.3 5786	ET ADDRESS					
TITLE	1			3.4 CiTY	- S1 - ZIP					
A   STREET ADDRESS   A   STREET ADDRESS   A   CTY - ST - ZIP			DELETE	4 1 T·TL			Change Addition			
A 4 CITY - ST - ZIP	NAME			4.2 NAM						
TITLE         DELETE         5 1 TITLE         Charge         Addition           NAME         52 NAME         52 NAME	STREET ADDRESS			4.3 SIRE	ET ADDRESS					
NAME	CITY-ST-ZIP			4.4 CITY	-ST- <b>Z</b> IP					
STREET ADDRESS	TITLE		☐ DELETE	5 1 THL	ŧ		Change Addition			
CITY-ST-ZIP         54 CITY-ST-ZIP           TITLE         □ DELETE         6.1 TITLE         □ Change         □ Addition           NAME         6.2 NAME           STREET ADDRESS         6.3 STREET ADDRESS         6.4 C-12-ST-ZIP	NAME			5.2 NAM	£					
TIFE         DELETE         6 1 TIFE         Change         Addition           NAME         6 2 NAME           STREET ADDRESS         6 3 STREET ADDRESS           CITY-ST-ZIP         6 4 C-Ty-ST-ZIP	STREET ADDRESS			5 3 STRE	F1 ADDRESS					
NAME         6.2 NAME           STREET ADDRESS         6.3 STREET ADDRESS           CITY-ST-ZIP         6.4 C-T2-ST-ZIP	CITY-ST-ZIP		.,,,,	5.4 Cify	-S1-ZIP					
STREET ADDRESS	TITLE		☐ DELETE	6 1 TITL	F		Change Addition			
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	STREET ADDRESS			63.8198	ET ADORESS					
	CITY-ST-ZiP				-ST-Z(P		07/0/00 Flands Out to 14 45			

I do hereby certify that the information supplied with this filing is voluntarily furnished and has not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual report 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 empoys appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: ...

SUMANI SIGNATURE AND THEODOR PRINTED NAME OF SIGNING OFFICER OF

WDYA.

4/30/96

Daytine Phone #