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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

OCHMENT #

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1. Corporation	H I Nail Fo	# IVI / 42 /ICES, INC.	21	(9)				1 HARREN DN HARR (BAN BRIN HAR)		INDIA DEBIL DE		
Denoinal Disc	o of Rusings	,	Ma	lina Addrone								
Principal Place of Business				Mailing Address								
% 441 S. STATE RD 7 Suite 15				% 441 S. STATE RD 7 Suite 15								
MANJATE FL 33068				MANJATE FL 33068								
US SSSSS				US				3. Date Incorporated or Qualified	3a. Da	ate of Last	Report	
		_					04/22/1988	04/	30/1996			
2. Principal P	2. Principal Piace of Business			2a. Mailing Address				4, FEI Number			Applied For	
21				26				65-0049081			Not Applicable	в
Suite, Apt. #, etc				Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional	
4-				27							Required	4
City & State				City & State				6. Election Campaign Financing Trust Fund Contribution			O May Be d to Fees	
Zφ	Country			Zip Cou			,	8. This corporation has liability for		tax under	s. 199.032,	
24 25 9. Name and Address of Current R			29 ent Registe					Florida Statutes La 10. Name and Address of New Re				
HO	MITT, STUA					81	Name					7
												
441 S. STATE RD 7 Suite 15				B			Street Add	treet Address (P.O. Box Number is Not Acceptable)				
	NJATE FL 3	2068				83						\neg
INCSE	MULTIC	0000								<u></u>		_
						84	City		FL	. 85 Zij	p Code	
11. Pursuant	to the provis	ions of Sections 607.0	502 and 60	7.1508, Florida Statu	tes, the al	DOVE	e-named co	rporation submits this statement for the p		changing	its registered	a
office or r agent. La	registered ag ım familiar w	gent, or both, in the Sta ith, and accept the ob	ite of Florid ligations of,	a Such change was Section 607.0505, FI	authorize orida Stat	d by utes	, the corpor s.	rporation submits this statement for the pation's board of directors. I hereby accept	ot the app	oontment a	is registered	•
SIGNATURE												.
12.	Signature, typec	OFFICERS A			13.	d Age	per erutarigia inc	uired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE CDQ AND	DIDECTO	100 IN 12	6
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NAME	HILDOCK, JAMES			<u></u>		1.2 NAME						
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NAME	HILDOCK, PAULA			·		22 NAME						1
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NAME	!				6.2 N/							- [
STREET ADDRESS							ADDRESS					
CITY - \$1 - 769	ı				■ 64 €	17 - C	:T-7IÞ					- 1

14. I do hereby certify that the information supplied with this filing does not quality 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 Plack 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

ON DIRECTION

FILED

Apr 04 1997 8:00am

Secretary of State