	E NOW: FILING F PROFIT PROPATION JUAL REPORT 1996	SIU SE.	LORIDA DEPARTM Sandra B. N Secretary (DIVISION OF CO	MENT OF Mortham of State	SIATE				
1. Corporate	JMENT # M79 N BEC CORPORATION	9379	(7)	,,					
Principal Plac	ce of Business	Malloy A							
Principal Place of Business C/O ROGER T. SANFORD RT 3 BOX 82 OLD TOWN FL 32680 Mailing Address C/O ROGER T. SANFORD RT 3 BOX 82 OLD TOWN FL 32680 OLD TOWN FL 32680									
2 Principal F	Place of Business	- 14-7 -				 Date incorporated or Qualifity 05/04/1988 		ite of Last I 04/27/1 !	
1	idos of positicas	2a. Mailine 26	g Address			4. FEI Number 59-2890286		-	Applied For Not Applicable
Suite, Apt.	. #, etc.	Suite,	Apt. #, etc.			5. Certificate of Status Desired			5 Additional Required
City & Stat	te	City & 28	State		·	Election Campaign Financin Trust Fund Contribution	g 🔲	\$5.0	00 May Be
Zip 4	Country 25	Zip 29	30	Country		8. This corporation has liability	for intangible Yes \[\] No		
	9. Name and Address of Co	urrent Registered A	gent			10. Name and Address of Ne		Agent	
SANEO	ORD, ROGER T.			81	Name				
RT 3 B				82	Street Add	ress (P.O. Box Number is Not Acce	otable)		
OLD TO	OWN FL 32680			83					
				63		_			
				84	City			85 7	In Code
I1. Pursuant	to the provisions of Sections 607.	0502 and 607.1508.	Florida Statutes, th	84		Calum submits this statement for the	FL	_	ıp Code
II. Pursuant or registe familiar wi	to the provisions of Sections 607, red agent, or both, in the State of ith, and accept the obligations of.	0502 and 607.1508. Florida. Such change Section 607.0505, F	Florida Statutes, the was authorized by lorida Statutes.	84		ration submits this statement for the did not directors. I hereby accept the a	FL purpose of ch appointment a	_	•
tamiliar wi	ith, and accept the obligations of,	Section 607.0505, F	lorida Statutes.	e above n	amed corno oration's boa	or or ectors. Thereby accept the a	FL purpose of ch appointment a	_	•
tamiliar wi	ith, and accept the obligations of,	Section 607,0505, F	lorida Statutes.	e above not the corporated Agest	amed corno oration's boa	d கண்ணவர்	арропптем а Гить	anging its s registered	registered off-ce d agent. I am
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oath; that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPEOTIS PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAY OF SIGNING OFFICER OR DIRECTOR

DAY OF SIGNING OFFICER OR DIRECTOR