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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Jan 30 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

**DOCUMENT # M86968** 

(8)

BOX 2777 BOX 2777	ATLANTIC	C ANALYTIC INC.	• • •				) (1.074.01); 40); 10/10.01/10.11/10.41/10.11/10.		IAN BIBN BIBN	<b>8/8/1   841</b>
2. Principal Packs of Business   2a. Making Address   3a. Making Addre	BOX 2777 NEW SMYRNA BEACH FL 32170-2777 NEW SMYRNA BEACH FL 32170-2777									
22										Report
Secretary   Secr	2. Principal Pl	lace of Business	2a. Mailing Address			**********************		1 774		pplied For
Cry A Size.    27	21		26				59-2901896		N	ot Applicable
City & Slott  Zep	<del></del> '	#, etc	<del>}</del> 1				5. Certificate of Status Desired			
2 P Country 2 P Country 2 P Country 3 P P P Country 3 P P P P P P P P P P P P P P P P P P		r.	· · · · · · · · · · · · · · · · · · ·					· · · · · · · · · · · · · · · · · · ·		<del>. '</del>
25   25   25   25   25   25   25   25	——————————————————————————————————————	C	<b>⊢</b> , ′					П		
25   29   30   Florido Statutes   Ve   No	· • • • • • • • • • • • • • • • • • • •	Country		Cou	intry	<del></del>	***			
SPENCE, HAL ESO. 221 N CAUSEWAY NEW SMYRNA BEACH FL 32169  11. Fursion: to the provisions of Section's 600 6502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent 1 am the east with, and accept the obligations of Section's 500 6502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent 1 am the east with, and accept the obligations of Section's 500 6502 and 607 1508. Florida Statutes  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. OFFICERS AND DIRECTORS IN 12  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  16. OFFICERS AND DIRECTORS IN 12  17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. WESTERHEIDE, DAVID L.  10. SUBMIT ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  10. OFFICERS AND DIREC	24	25	29	30			· ·			,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Addition  SYSTEM CLUSSEWAY NEW SMYRNA BEACH FL 32169  82 Street Address (P.O. Box Number is Not Acceptable)  83 B4 City FL 85 Zip Code  11. Pursuant to the provisions of Sector's 607 6602 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered affect of registered agent. In the first with, and accept to changinos of, Sectorior 507 505, Florida Statutes  SIGNATURE  12. OFF SCERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. OFFICERS AND DIRECTORS 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  17. MEXISTER ADDRESS 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. WESTERHEIDE, DAVID L  12. WASTERHEIDE, DAVID L  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. WESTERHEIDE, DAVID L  12. WASTERHEIDE, DAVID L  13. THE DAVID CHANGES TO OFFICERS AND DIRECTORS IN 12  10. WESTERHEIDE, DAVID L  12. WASTERHEIDE, DAVID L  13. STREET ADDRESS  14. STREET ADDRESS  22. SPENNSULA  13. STREET ADDRESS  22. SPENNSULA  14. STREET ADDRESS  22. STREET ADDRESS  23. STREET ADDRESS  33. STREET ADDRESS  34. STREET ADDRESS  34. STREET ADDRESS  35. STREET ADDRESS  35		g. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Re	gistered	Agent	
SET   Purposer to the provisione of Section's \$77,000 and \$07,1008. Florids Statutes, the above-named corporation submits this statement for the purpose of changing lip registered agent. In mix-law reth, and accept this obligations of, Section 807,0508. Florids Statutes.    SIGNATURE	SPEN	VCE, HAL ESQ.			81	Name				
Ball   City   FL   Bs   Zip Code					82	Street Add	ress (P.O. Box Number is Not Acceptate	ole)		
11. Pursuant to the provisions of Section's 607 6502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. Lam furnishar with, and accept two obligations of Section 607 0505, Florida Statutes.  SIGNATURE  12. OF FIGERIS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  17. OFFICERS AND DIRECTORS  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. WESTERHEIDE, DAVID L.  29. WAS STREET ADDRESS  19. DELETE  19. TITLE  29. WAS  29. SPENINSULA  19. STREET ADDRESS  29. SPENINSULA  29. STREET ADDRESS  29. SPENINSULA  29. STREET ADDRESS  29.	NEW	SMYRNA BEACH FL 32169							<del></del>	
11. Pursuant to the provisions of Sections 607 05002 and 607 1508. Floridal Statutes, the above-named corporation submits this statement for the purspose of changing list registered agent. I am the risks with, and accept the obligations of Section 607 0505. Floridal Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  11. OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  16. OFFICERS AND DIRECTORS IN 12  17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS ADDITIONS/CHANGES ADDI					83					
11. Parasizar to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits his statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.  SKRATUR  SKRATUR  2. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  THE DPTV OFFICERS AND DIRECTORS IN 12  THE OFFICERS AND DIRECTORS IN 12  TH					84	City			<b>85</b> Zip	Code
SIGNATURE	de Discussos	to the manifelant of Casting CO7.06	00 and 007 1500. Florida D	nt ton the e		sampd sam				
Time	SIGNATURE	Signaria, ing economic distance of explaned as	port and title if daplicable	(NOTE: Registere			ired when reinstating)	DATE	······	····
NAME STREET ADDRESS CITY 517-2P  THE NAME STREET ADDRESS CITY 517-2P  DELETE 31 TITLE 22 NAME 23 STREET ADDRESS CITY 517-2P  DELETE 31 TITLE 32 NAME 33 STREET ADDRESS CITY 517-2P  DELETE 31 TITLE 32 NAME 33 STREET ADDRESS CITY 517-2P  DELETE 41 TITLE 32 NAME 33 STREET ADDRESS CITY 517-2P  DELETE 41 TITLE 32 NAME 42 NAME 43 STREET ADDRESS CITY 517-2P  DELETE 41 TITLE 32 NAME 43 STREET ADDRESS CITY 517-2P  DELETE 41 TITLE 33 NAME 43 STREET ADDRESS CITY 517-2P  DELETE 51 TITLE 52 NAME 53 STREET ADDRESS CITY 517-2P  DELETE 51 TITLE 52 NAME 53 STREET ADDRESS CITY 517-2P  DELETE 51 TITLE 51 TITLE 51 TITLE 51 TITLE 51 TITLE 52 NAME 53 STREET ADDRESS CITY 517-2P  THE NAME 54 ADDRESS 55 STREET ADDRESS CITY 517-2P  DELETE 51 TITLE 51 TITLE 51 TITLE 52 NAME 53 STREET ADDRESS 54 ADDRESS 55 STREET ADDRESS 55 STREET ADDRESS 65 STREET ADDRESS 65 STREET ADDRESS 66 STREET ADDRESS 67 STREET ADDRESS	,	,			ti r	·····	ADDITIONS/CHANGES TO OFFIC	ERS AND		
STREET ADDRESS   SQUISSION			L DECERE						☐ Ollarige	Audinon
THE						ADDRESS				
THE										
23 STREET ADDRESS   24 CITY_ST_ZIP			DELETE						Change	Addition
2   4   CITY - 51 - 749	NAME			2.2 N	AME					•
THE	STREET ADDRESS			2.3 \$	TREET /	ADDRESS				
NAME	CHY-ST-ZiP			2.40	ITY-S	T-ZIP				
STREET ADDRESS	TILE		☐ DELETE	3.1 T	ITLE				☐ Change	Addition
CITY-S1-7IP	NAME			3.2 N	AMÉ	l				
TILE	STREET ADDRESS			3.3 S	THEET	ADDRESS				
A 2 NAME  STREET ADDRESS CITY - ST - ZIP TITLE DELETE S1 TITLE Change Addition NAME STREET ADDRESS CITY - ST - ZIP TITLE S1 TITLE S2 NAME STREET ADDRESS CITY - ST - ZIP TITLE S4 CITY - ST - ZIP TITLE S4 CITY - ST - ZIP TITLE S6 T TITLE S1 TITLE S1 TITLE S1 TITLE S1 TITLE S2 NAME S1 TITLE S4 CITY - ST - ZIP S1 TITLE S4 CITY - ST - ZIP S1 TITLE S			DELETE		*******	T-ZIP			Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE DELETE S1 TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP TITLE S4 CITY-ST-ZIP TITLE S4 CITY-ST-ZIP TITLE Change Addition AME STREET ADDRESS CITY-ST-ZIP TITLE S4 CITY-ST-ZIP TITLE S1 TITLE	i		DECEIE						Change	[] Addition
CITY-ST-ZIP  TITE:  DELETE 5.1 TITLE						ADDDECC.				
THE DELETE S.1 TITLE Change Addition  NAME  STREET ADDRESS  CHY-S1-ZIP  THE STREET ADDRESS  CHY-S1-ZIP  THE STREET ADDRESS  CHY-S1-ZIP  Addition  AME  STREET ADDRESS  CHY-S1-ZIP  6.3 STREET ADDRESS  6.4 CHY-S1-ZIP  14. I do hereby certify that the informating supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the						1				
STREET ADDRESS CITY - ST - ZIP TITLE DELETE STREET ADDRESS CITY - ST - ZIP TITLE STREET ADDRESS CITY - ST - ZIP Addition AME STREET ADDRESS CITY - ST - ZIP CHANGE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP 14. I do hereby certify that the informating supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the			DELETE		•••••	· 21r		<del></del>	Change	Addition
STREET ADDRESS CITY ST-ZIP  TITE: STREET ADDRESS 5.4 CITY - ST-ZIP  5.1 TITLE 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS CITY - ST-ZIP 6.4 CITY - ST-ZIP 6.4 CITY - ST-ZIP 6.4 CITY - ST-ZIP  14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statules. I further certify that the										
CHY-ST-ZIP  TITLE  5.4 CHY-ST-ZIP  6.1 TITLE  6.1 TITLE  6.2 NAME  5.2 NAME  6.3 STREET ADDRESS  CHY-ST-ZIP  14. I do hereby certify that the informating supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statules. I further certify that the						ADDRESS				
TITE DELETE 6.1 TITLE Change Addition  AAM:  STREEL AUDRESS CITY-ST-ZIP  14. I do hereby certify that the informating supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the										
STREET ADDRESS CITY-ST-ZIP  6.3 STREET ADDRESS 6.4 CiTY-ST-ZIP  14. I do hereby certify 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			DELETE						☐ Change	Addition
6.4 City-St-ZiP  14. I do hereby certify 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	NAME			6.2 N	AME					
14. I do hereby certify 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	STREET ADDRESS			6.3 S	TREET /	ADDRESS				
14. I do hereby certify 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		. marked a constraint with the marked and a constraint an								
Information indicated on this annual robort or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it 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 12 or Block 13 inchanged, or on all attachment with an address.	irsterresselles	us incluiator on thic secund falcor or	currelemental annual report	tic tour and	00011	rata and tha	it mu alanatura ahall haya tha aama laar	l officet or	a if made us	adar aath, tha