FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

BF RII	MENT n Narmo DGE, INC		90471	(1	,		 	2)	AN PIRIL MAN ANTIL MORI
Principal Place	of Business			Mailing Address					
10801 STARKEY RD SUITE 16 LARGO FL 34689			ľ	10801 STARKEY RD SUTIE 16 LARGO FL 34689					
US				U\$			3. Date Incorporated or Qualified 07/21/1988	3a. Date of L 05/0	ast Report 1/1995
2. Principal Pla	ace of Busin	ess	· · · · ·	Mailing Address			4. FEI Number		Applied For
Suite Apt. 4	# etc		26	Suite, Apt. #, etc.			59-2896212		Not Applicable
22							5. Certificate of Status Desired	\$	8.75 Additional Fee Required
City & State			28						\$5.00 May Be Added to Fees
Zip 24		Country 25	29	Ζφ 	30 C	ountry		☐ No	
	9. Name	and Address o	f Current Regi	stered Agent			10. Name and Address of New R	legistered Age	nt
*****						81 Name			
	EN, ROBE					82 Street Add	ress (P.O. Box Number is Not Acceptab	vie)	
	Starkey (Fl 34689	HU # 16				83			
DANGO	FL 34009					03			
						84 City		FL 85	Zip Code
11. Pursuant to	o the provisi	ons of Sections 6	607.0502 and 60	07.1508. Florida Sta	itutes, the at	ove named corpo	ration submits this statement for the pur	1	n te registered office
familiar with	ed agent, or h, and accep	oth, in the State enoitagistons to	of Florida, Suc of, Section 607	n change was author	orized by the	comoration's hos	and of discretors. I beach a page at the same	pose of other igni	stered agent Lan.
SIGNATURE		J		.0505, Honđú Statu	ites.	00100101101101	ration submits this statement for the pur ind of directors. Thereby accept the appo	omtrnent as regis	stored agent Tani
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GNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date:

Overland the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this amount 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 of Lustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name and the corporation of the corporat

SIGNATURE: X

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