NONPROFIT CORPORATION ANNUAL REPORT 1996				G FEE IS \$61.25 FLORIDA DEPARTMENT OF STATE Sandra B. Morthem Secretary of State DIVISION OF CORPORATIONS							
[ 1.	Corporation		<b>100684</b> n, inc.		(3)				T TRAVIER DI OCCI DEVIE EVEN AUTO	118   8191   BIRIY ALTRI DIGI	818/1 818/1 (88)
C 1	/o joseph	e of Business IINE V CAMPO GEWOOD DR. - 33510		1605 CO	ddress Sephine V CA ITTAGEWOOD IN FL 33510				3. Date incorporated or Qualified	3a. Date of Last	Report
	Principal Pl	lace of Business		2a. Mailin	g Address				12/30/1983 4. FEt Number 59-2439694	03/27/1	Applied For
21	Suite, Apt.	ite, Apt. #, etc.		26 Suite, Apt. #, etc.					5. Certificate of Status Desired		Not Applicable 5 Additional
22	City & State				City & State				6. Election Campaign Financing	- \$5.0	Required IO May Be
23	Zip	28 Country			Zip Country				Trust Fund Contribution Added to Fees   8. This corporation has liability for intangible tax under s. 199.032,		
24	<u> </u>	25 9. Name and Add	ress of Current	29 Registered /	Agent	30	Т-		Florida Statutes	Yes X No	
			··· ··- ·-			81	Name				
CAMPO, JOSEPHINE V. 1605 COTTAGEWOOD							82	Street Add	Iress (P.O. Box Number is Not Acceptable	9)	
BRANDON FL 33510						83					
							84	City		<b>65</b> Ži	p Code
11	11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above named								votion a boolta this statement for the		
	orregister	red agent, or both, in t ith, and accept the obl	ne state or Fiorida	Such chang	e was autnoria	200 DY της	corp	oration's bo	ard of directors. I hereby accept the appo	ntment as registered	i agent. I am
SI	GNATURE _										
12		Signature, typed or printed nar	OFFICERS AND I		(N)	DTE Register		nt signature raquir	ed when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIRECTO	BS IN 12
TITI	LF	PD			DELETE	11	TITLE		· · · · · · · · · · · · · · · · · · ·	Change	Addition
NA		CAMPO, RAMON 1605 COTTAGEN					NAME				37
	IEET ADDRESS Y • ST - ZIP	BRANDON, FL 0					STREET CITY-S	ADDRESS			L L
TITL		DT			DELETE		TITLE			Change	Addition
NAP		CAMPO, JOSEPI 1605 COTTAGEV					NAME				
	IÉET ADDRESS Y - ST - ZIP	BRANDON FL	1000					ADDRESS			
TITL		D			DELETE		CITY-: TITLE	51-214		Change	Addition
NAM						3.2	NAME				-
	IEET ADDRESS Y-ST-ZIP	907 OAK HOLLO BRANDON FL	WY 01.					ADDRESS			
मा					DELETE		<u>CITY-</u> TITLE	51-21r		Change	Addition
NAM	dE					4. 2	NAME				
	EET ADDRESS							ADDRESS			
ТЛ	r-S1-ZIP E	•••••			DELETE		<u>CITY-S</u> TITLE	1-2IP		Change	Addition
NAM	AE				_		NAME				
	EET ADDRESS					53	STREET	ADDRESS			
COT TUL	r - S1 - ZIP .E				DELETE		<u>city-s</u> Title	it-zip		Change	Addition
NAN							NAME			ட புள்ளு	
SIR	EET ADDRESS					63	STREET	ADDRESS			
	r ST-ZIP I do hereb	v certify that the inform	nation supplied with	n this filing is	voluntarily form	vished and	CITY-S	s not qualify	for the exemption stated in Section 119.0	7(2)(L) Elarida Otation	on I further
	oath; that	I am an officer or direct	ted on this annual tor of the corporat	report or sup ion or the rea	piemental ann ceiver or truste	iuai report ie empow	IS tri	le and accur	ate and that my signature shall have the s is report as required by Chapter 617, Flor	ama laggi affact on it	mode under
	appears in	Block 12 or Block 13	if changed, or on	an attachmer 2	nt with an addi	ress.					and the second sec
SIGNATURE: Jac plane Campo 2-1-96 (813) 685-4214 SEGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICIEN OR DIRECTOR Cate Destroy Prove											
		SIGNAT	URE AND TYPED OR PR		F SIGNING OFFIC	A OR DIRE	стоя		Date	Daytime Phone	•