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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

1. Corporation Name

(1)

		PYAT, INC.			
Principal Place o	of Business	Mailing Address		I Maisia) die Alfai disti indit sese	i ifit titel filen dien filen filen fabri dien dien ien
% 425 NORTH STE. A	H PENINSULA DR.	% 425 NORTH PENIN STE. A	SULA DR.		
DAYTONA BCH. FL 32118		DAYTONA BCH. FL 32118		3. Date Incorporated or Qualified 09/17/1991	3a. Date of Last Report 02/07/1995
. Principal Pla	ce of Business	2a. Mailing Address		4. FEI Number	Applied For
Ì .		26		59-3089318	Not Applicab
Suite, Apt #	, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
		28		Trust Fund Contribution	Added to Fees
Zιρ	Country	Ζιρ	Country	8. This corporation has liability for in	intangible tax under s. 199.032, Yes 🔲 No
	25 9. Name and Address of Cur	rent Registered Agent	[30]	Florida Statutes Q  10. Name and Address of New R	
	9. Name and Address of Our	Tell registered Agont	81 Name		
DICHADI	O N CHIDCHIAM DA		20 30	/O.O. Roy Number is Not Accostob	do)
	O K. CHURCHMAN, P.A.		82 Street Add	ress (P.O. Box Number is Not Acceptable	le)
STE. A	rth Peninsula Dr.		83		
DAYTONA BCH. FL 32118			94 (0)		85 Zip Code
UNITON	A BON. PE CETTO		84 City		FL 13 2 P COOR
GNATURE		Section 617.0503, Florida Statute		, ,	
GNATURE _	Signature Typed or pented name of regularies a	agent and bition tay what be. (1)	sOTE. Registered Agent signature require	ad when ranstatings  ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRECTORS IN 12
GNATURE _	Signature: Typest or pented name of regularies a OFFICERS				ICERS AND DIRECTORS IN 12
GNATURE _	Signature: hypest or printed name of regularists OFFICERS PD	agent and title if anyth at h	NOTE: Registered Agent signature require		ICERS AND DIRECTORS IN 12
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SIGNATURE:

NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Prione #