FILE NOW: FILI				
NONPROFIT CORPORATION ANNUAL REPORT 1996	FLORIDA DEPAR Sandra B Secretari	TMENT OF STATE		
DOCUMENT # N9500001992 (5)				
THE WAY THE TRUTH THE LIFE F				
Principal Place of Business	Mailing Address			1581 OB111 OB141 11010 EG116 16110 1101 1101
1511 E DIANA ST TAMPA FL 33610 TAMPA FL 33610				
			3. Date Incorporated or Qualified 04/25/1995	3a. Date of Last Report
Principal Place of Business     1	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. #, etc.	Suite, Apt. #, etc. Suite, Apt. #, etc.		Certificate of Status Desired	Not Applicable \$8.75 Additional
City & State	City & State		Election Campaign Financing	Fee Required
Zip Country	Zip	Country	Trust Fund Contribution  8. This corporation has liability for int	Added to Fees
24 25 9. Name and Address of Current	29 Segistered Agent	30		Yes No
OVERTON, PETER J				
1511 E DIANA ST Street Address (P.U. Box Number is Not Acceptable)				
TAMPA FL 33610 83 85   Zin Code				
11. Pursuant to the provisions of Sections 617.0502	regarding submits this statement for the surround	FL 85 Zip Code		
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am				
SIGNATURE Signature, typed or printed name of registered agent a		Registered Agent signature re		DATE
TULE POLICIA OFFICERS AND	DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12  Change
STREET ADDRESS 1511 E DIANAS	Prest	1.2 NAME 1.3 STREET ADDRESS		Paesident
CITY-ST-ZIP AMIA FL.3	GOO RENT	14 CITY-ST-ZIP	TAMPA FL 33610 _	Dilecter.
NAME DAVIGO CHEN	VILLE .	21 TITLE 22 NAME	Beating Overton	Ce President
STREET ADDRESS CITY-ST-ZIP  TAMBA F1.336	10 Presidend	2.3 STREET ADDRESS 2. 4 CITY - ST - ZIP	TANNA FL 3261	Director
NAME MR. BHIGANG	ARAPORE	3.1 TITLE	Ma Bill GANGARAM	5305
STREET ADDRESS 2230 E-113 AVE	• •	3.2 NAME 3.3 STREET ADDRESS		ce President
TAMPA 71- 33612	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	TAMPA F.J. 33612	DIRECTOR  Change Addition
NAME STREET ADDRESS		4. 2 NAME		_ one-igo yoution
CITY-ST-ZIP		4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		
TITLE NAME	DELETE	51 TITLE 52 NAME		Change Addition
STREET ADDRESS		5.3 STREET ADDRESS	300001780	3633
CITY-ST-ZIP TITLE	DELETE	5.4 CITY-ST-ZIP	-04/22/9601030 ***61.25	5004 Addition
NAME STREET ADDRESS		6.2 NAME 6.3 STREET ADDRESS		
CITY-ST-ZIP	h this filing is voluntarily fundaha	64 CITY-ST-ZIP		
14. I do hereby certify that 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.				
SIGNATURE: (ELER J. CIVERIEN 1/31/96 (513)236-512011				
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Daying Phone I				