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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

	96	DIVISION O	F CORPORATIONS					
OCUME Corporation Nar		8 (8)						
•	SERVICE CO.				4 10 0 (4 0 0 1 4 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(1811 213 1) 2 1	411 E1611 A1811	A1811 A1811 1981
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3 TYCO PARK-TA	AX DEPT.	3 TYCO PARK-TAX	DEPT.					
ANNUALS EXETER NH 038	33	ANNUALS Exeter NH 03833		-	3. Date Incorporated or Qualified	I an Dot	e of Last Re	nod.
	•				07/20/1987)4/28/199	
Principal Place of	of Business	2a. Mailing Address			4. FEI Number	· L	I	pplied For
]		26			52-1523726			lot Applicable
Suite, Apt. #, et	tc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional lequired
City & State		City & State			6. Election Campaign Financing		\$5.00	May Be
]		28			Trust Fund Contribution			to Fees
Zip	Country	Zip	Country	- 1	This corporation has liability for Elorida Statutes	intangible t No	ax under s	199.032,
9	25 Name and Address of Current	29 t Registered Agent	30		10. Name and Address of New R		Agent	
	, , , , , , , , , , , , , , , , , , , ,		81 Nar	ne				
CT CORPO	DRATION SYSTEM		82 Stre	et Address	(P.O. Box Number is Not Acceptab	ole)		
	NE ISLAND ROAD							
PLANTATIO	ON FL 33324		63					
			84 City			FI	85 Zrp	Code
formilies with a	ne provisions of Sections 607.0502 agent, or both, in the State of Florid and accept the obligations of, Secti	ia. Such Chango was admo	mizod by the berperane					
IGNATURE	active, typed or printed name of registered agent		tes. (NOTE: Registered Agent signal		en reinstatingi	DATE		
SIGNATURE	ature, typed or printed name of registered agent OFFICERS AND	and title if applicable DIRECTORS	(NOTE: Registerer) Agrint signal		en renstating) ADDITIONS/CHANGES TO OFF	DATE	D DIRECTO	RS IN 12
SIGNATURESyric	other, typed or printed name of registered agent OFFICERS AND	and title if applicable	(NOTE: Registered Agent signal 13. 1.1 TITLE		en reinstatingi	DATE		
Signature	officers and or printed name of registered against OFFICERS AND PD KOZLOWSKI, L. DENNIS	and title if applicable DIRECTORS	(NOTE: Registere) Agent signer 13. 1.1 TILE 1.2 NAME	ure required w	en renstating) ADDITIONS/CHANGES TO OFF	DATE	D DIRECTO	RS IN 12
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For increase years the information supplied with this timing is voluntarily furnished and does not quality for the exemption stated in Section 119.07(3)(ii), notice statutes. Interfer 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 oath; that I am an officer or director of the corporation or the receiver or frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

NING OFFICE OR DIRECTOR BENNAND J. When to