FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P28338

(2)

FILED Apr 21 1997 8:00am Secretary of State

HOUFIN	ig sysiei	MS, ING.												
Principal Plac	e of Business			Ma	iling Address					1 1881/1881 118 11881 1818 8 1188 (1 18 1/188)		HON BABA DIDII		
% JAMES A. SCONYERS 1508 BIG BEAR CIRCLE BRIMINGHAM AL 35215-5140				% JAMES A. SCONYERS 1508 BIG BEAR CIRCLE BRIMINGHAM AL 35215-5140					•	1.5.			_	
:									ļ	3. Date Incorporated or Qualified 03/02/1990	1	ite of Last R)2/1996	epori	
2. Principal Place of Business				2a. Mailing Address				T	4. FEI Number	1		plied For	1	
21				26					63-0847310		No	t Applicable		
Sulte, Apt. #, etc.				Suite, Apt. #, etc.				l	5. Certificate of Status Desired		\$8.75		Ì	
City & State				City & State						·	Fee Re			
23				h					6. Election Campaign Financing Trust Fund Contribution	П	\$5.00 Added t			
Zip		Country		28	Zip	Co	untry			8. This corporation has liability for in				\forall
24	<u> </u>	25		29		30			i	p	langible Yes	No	. 188.032,	Ī
		and Address of			ered Agent		7			10. Name and Address of New Reg				1
PET	ERSEN, JEF						61	Name						7
	2 CAVALCA						82	Street A	ddres	s (P.O. Box Number is Not Acceptab	e)			-
	LAHASSEE						L	0.100(7)		o (i .e. box rumbo) to trei ricospido				
							83							ı
							84	City				85 Zip (Code	-
	,							-			FL	'		
11. Pursuant office or r agent. I a	. 10 the provision registered age am familiar with	ons of Sections only, or both, in the h, and accept the	607.0502 a no State of l no obligatio	nd 60 Florida ns of,	7,1508, Florida Statut a. Such change was Section 607,0505, Fl	les, the a authorize orida Sta	abovo ed by stutes	e-named c / the corpo s.	corpor oration	ation submits this statement for the p a's board of directors. I hereby accep	urpose of I the app	changing it pintment as	s registered registered	
SIGNATURE				121.51.5.							- 1-11			
12.	Signature, typed o	or printed name of reg	RS AND D			L Hegister		nt signature re	equired	when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE FRS AND	DIRECTOR	S IN 12	- 6
TITLE	PD	0.110	TIO FAILE E		DELETE	1.1 1		·T		7,0011101107017111100010101110	L110 / 1112	☐ Change	Addition	- 0
NAME		IS, JAMES A.				1.2 M		1				_ •		3
STREET ADDRESS		BEAR CIR.				1.3 5	STREET	ADDRESS						ြင်
CITY-ST-ZIP	BIRMINGH					1.40	ery-s	1 - ZIP						Į,
TITLE	V\$D				DELETE	211	ITLE					Change	Addition	٦
NAME		rs, Lynda ha	UN			2.2 N	IAME							
STREET ADDRESS		BEAR CIR.				2.3 \$	TREET	ADDRESS						
CITY-ST-ZIP	BIRMINGH	IAM AL					CITY-5	S1-ZIP						
TITLE					DELETE	3.1 ⊺						Change	Addition	
NAME	ļ					3.2 N								
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NAME						52 N						-	_	
STREET ADDRESS						•		ADDRESS						
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TITLE	<u> </u>				DELETE	6.1 T						Change	Addition	1
TNAME						6.2 N	IAME							
STREET ADDRESS		÷				6.3 S	TREET	ADDRESS						
CITY-ST-ZIP	<u> </u>					6.4 0	HY-S	1 - ZIP						_

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 eath; that I am an officer or director of the corporation or the receiver or trustee 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.