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

PROFIT



ELORIDA DEPARTMENT OF STATE

ANNL	PORATION IAL REPORT 1996	Secretar	Sandra B. Morthan: Secretary of State DIVISION OF CORPORATIONS				
1. Corporation		0006138 (1)			1 1881/881 1/8 18/18 1/8/1 88/1 88/1		
Principal Place of Business Mailing Address 12811 KENWOOD LN STE 218 FORT MYERS FL 33907 US Mailing Address 12811 KENWOOD LN STE 218 FORT MYERS FL 33907 US				3. Date Incorporated or Qualified 3a. Date of Last Report 04/11/1995			
2. Prinopal Pla	ace of Business	2a. Mailing Address			4. FLI Number	L	Applied For
Suite, Apt.	1 etc	26 Suite, Apt. #, etc.	-01		65-0369063	00	Not Applicable
22	a, etc	27	4		5. Certificate of Status Desired		. 75 Additional ee Required
City & State	SP	City & State (DV	7		Election Campaign Financing Trust Fund Contribution		.00 May Be
Ζιρ	Country	Zip	Country		8. This corporation has liability for	ntangible tax unde	
24	9. Name and Address of Curren		30		Florida Statutes X Yes 10. Name and Address of New F	No Registered Agent	
81				Name		ogracio rigani	
FATHAUER, JOHN R 7181 COLLEGE PARKWAY SUITE 36			82	Street Addr	ess (P.O. Box Number is Not Acceptable)		
			83	83 DEV.			
FT MYER	RS FL 33907		84	City	<u>5</u> r	 85	Zıp Code
11. Pursuant t	o the provisions of Sections 607.0502	and 607.1508, Florida Statutes	the above r	ransed corpor	ration submits this statement for the pur	pose of changing i	ts registered office
or register familiar wit	ed agent, or both, in the State of Flore h, and accept the obligations of, Secti	la Such change was authorized on 607,0505, Florida Statutes	by the corp	oration's boa	rd of directors. I hereby accept the app	ointment as registe	red agent. I am
SIGNATURE !	₹ Signature, typed or printed have oblitogests and agen						
		er ditterit aggaination (1903) te	man Libert LAD	diskin afore record	Miles Fer at this co		
12.	OFFICERS AND		fact stened Age	Set alore respons	ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIREC	TORS IN 12
TITLE	OFFICERS AND		13. 1 1 TIELE	· Set afore respire			
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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 oath, 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 chapged, or on an attachment with an address.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR PRESSUREN PRESIDENT

4-30-74 (941) 218 4353