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

CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9200008824 (4)

FILED Apr 25 1997 8:00am Secretary of State

			Mailing Add 5600 US 98 N LAKELAND FL	WORTH, 8-7							
								3. Date Incorporated or Qualified 12/03/1992	3a. Date of 05/01/1		pod
2. Principal	2. Principal Place of Business 2a. Mailing Address						, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4. FEI Number	- 1	Ap	plied For
1			26		_,		. 	59-3152086			t A pplicable
Suite, Ap	it #, €lċ.		Suite, Ap	ot. #, etc.				5. Certificate of Status Desired		6.75 A Fee Re	Additional quired
City & St	ate		City & St	ate			· · · · · · · · · · · · · · · · · · ·	6. Election Campaign Financing	\$	5.00	May Be
3			28	·····				Trust Fund Contribution		Added to	
Ζφ ግ		Country	Ζφ		Coun	try		8. This corporation has liability for i			199.032,
Ц	O Mem	25 e and Address of Cui	29		30			Fiorida Statutes 10. Name and Address of New Re	Yes No		
V0			Italit vehistoren vå	7111		81	Name	10. Italie and Address of New No	Sistered water	<u></u>	
Young, Robert B 5600 US 98 North, S-7											
LAKELAND FL 33809					[1	32	Street Addre	ddress (P.O. Box Number is Not Acceptable)			
UNI	ACDAIND LE	33008			1	B3					
					L		<u></u>			.,	
					4	84	City		FL 85	Zip (Code
agent i SIGNATURE		ed or printed name of registere;						oration submits this statement for the pon's board of directors. I hereby accepted when reinstaling! ADDITIONS/CHANGES TO OFFICE	DATE		
nte	PSD	Orrigens		DELETE	1.1 TITL	F		P/T/D	XX		Addition
NAME		ROBERT B	_		1.2 NAM		1	Young, Robert B.			
STREET ADDRESS	EAR DIST	LER STREET						526 Butler Street			
311Y - S1 - ZIP		MERE FL			1.4 CIT		1	Vindermere, FL 3	4786		
TILE	S			DELETE	2 1 TITL			72114021110407 12		Change	Additio
NAME	HARWEL	L, MICHELLE			2.2 NAM	AE.					
STREET ADORES	s 17443 S	PRING VALLEY ROA	AD .		2.3 STR	EET A	address				
City-St-2if	DADE C	TY FL			2. 4 GIT	Y-\$1	T- 21P				
MILE	V			DELETE	3.1 TITE	.E				Change	Additio
NAME		N, WILLIAM D			3.2 NAN	ИE	-				
STREEL ADDRES	J	NLE CIRCLE			3.3 STA	EET A	address				
CITY - ST - ZIP	CASSEL	BERRY FL			3.4. CIT		T-21P		·····		
ĭĭĭ€F				DELETE	4.1 7171		-		LJ.	Change	L_ Additio
NAME					4 2 NA						
STREET ADDRES	S						ADDRESS				
CHY-SI ZIF				DELETE	4.4 CIT		- ZIP		<u> </u>	Change	Addition
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NAMÉ Ozofet konsore					5.2 NAM		ADDDEGG				
STREET ADDRES	5				- 1		ADDRESS				
CITY - S1 - ZIP					5.4 CIT	r-51	1-2P				
TITLE				DELETE	R 1 7171				77	hanne	Addition
				DELETE	6.1 TITL	.E				Change	Addition
	e] DELETE	62 NA)	.E VIE	ADDOCCO			Change	Additio
NAME STREET ADDRESS CITY- ST-ZIP	s] DELFTE	62 NA)	E ME IEET #	ADDRESS			Change	Additio

r oo nereby ceruity 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 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 changed, or an artitachment with an address.

SIGNATURE:

04/14/9