EIk& NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State * **
DIVISION OF CORPORATIONS

1997

DOCUMENT # P92000015298 (2)

FILED Mar 11 1997 8:00am Secretary of State

Principal Place 4123 W. KENNE TAMPA FL 3360	EDY BLVD	Mailing Address 4123 W. KENNEDY BLVD TAMPA FL 33609-2226	·			
				3. Date Incorporated or Qualified 12/30/1992	3a. Date of Last Report 01/25/1996	
· ·	lace of Business	2a. Mailing Address	watta Urii	4. FEI Number	Applied For	
21 10903 Alpharetta Hwy Suite, Apt #, etc		26 10903 Alpharetta Hwy Suite, Apt. #, etc.		59-3211802	Not Applicable	
22		27		5. Certificate of Status Desired	Fee Required	
City & State		Cily & State		6. Election Campaign Financing	\$5.00 May Be	
23 Roswell GA		28 Roswell GA		Trust Fund Contribution	Added to Fees	
Zip *	Country	Zip	Country	8. This corporation has liability for i		
24 30076	25 Fulton	29 30076 30	0]	Florida Statutes L 10. Name and Address of New Re	Yes No	
YINTOES, JOHN M.			82 Street Ad	JOHNA CRONIN SE	Ja\	
TAMPA FL 33609			156	2 Street Address (P.O. Box Number is Not Acceptable)		
			83 Sui	TE 200		
- 84				learwater	85 Zip Gode	
				, = : -	FL 85 Zip Gode 34625	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or took, 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 familiar with, and increase the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE	TV2	Xoku-	Registered Agent signature reg	- ×	1/20/97	
12.	Stignature, typed or proceed and of registered agen OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12	
100	D()	DELETE		D	Change Addition	
NAME	vint ges, John M	•	1.2 NAME	Vintges, John	1	
STREET ADDRESS	1358 FOREST EDGE BLVD.		1.3 STREET ADDRESS	730 Valley Summit	Dr.	
CITY-ST-ZiP	OLDSMAR FL 34677		1.4 CITY-ST-ZIP	Roswell GA 30075		
TITLE	VD	DELETE	2.1 TITLE	٧P	Change Addition	
NAME	VINTGES, KAREN		2.2 NAME	Vintges, Karen		
STREET ADDRESS	1358 FOREST EDGE BLVD ODLSMAR FL		2.3 STREET ADDRESS	730 Valley Summit Roswell GA 30075	Dr.	
CHY-ST-ZIP TITLE	ODEOMAIL LE	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE	ROSWEIL GA 30075	Change Addition	
NAME			3.2 NAME		• —	
STREET ADDRESS			3.3 STREET ADDRESS			
CHY-\$1-76*		***************************************	3.4. CITY - ST - ZIP			
TITLE		☐ DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME			
STHEET ADDRESS			4.3 STREET ADORESS			
City-S*-7iP		☐ DELETE	4.4 CITY-ST-ZIP		Change Addition	
TITLE		☐ Deterie	5.1 TITLE 5.2 NAME		Figure Fivedition !	
NAME STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS			
CITY+S1-7IP			5.4 CITY-ST-Z#P			
TITLE		☐ DELETE	6.1 TITLE		Change Addition	

14. I do hereby certify that the information supplied with this liling 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 fir 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 a procliment with an address.

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

SIGNATURE:

NAMÉ

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF

1/20/87

770 649 9300