## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

CORROBATION



FLORIDA DEPARTMENT OF STATE

| ANNUA                                       | AL REPORT 996  | EPORT Secretary of State   |                          |                        |  |  |  |  |
|---|--|--|--------------------------|------------------------|--|--|--|--|
| DOCUM<br>1. Corporation I                   | MENT # P9300   | 0004535 (9)  |                          |                        |  |  |  |  |
| ANDELAF                                     | R INCORPORATED   |  |                          |                        | -  <br>  | I <b>li</b> ikk l <b>i</b> kk bi <b>li</b> | E113                                     |  |
| Principal Place of Business Mailing Address |  |  |                          |                        |  |  |  |  |
| P.O. BOX 1994<br>RIVERVIEW FL 3             | 33569  | P.O. BOX 1994<br>RIVERVIEW FL 33569                                  |                          |                        |  |  |  |  |
|   |  |  |                          |                        | 3. Date Incorporated or Qualified 01/21/1993   | 3a. Date of<br>06/06/                      | 1995                                     |  |
| 2. Principal Plac                           | ce of Business   | 2a. Mailing Address  |                          |                        | 4. FEI Number  |  | Applied For                              |  |
| 21 Suite, Apt. #,                           | etc  | Suite, Apt. #, etc   |                          |                        | 59-3160244   | <u> </u>                                   | Not App'icable  8.75 Additional          |  |
| 22  | , etc  | 27   |                          |                        | 5. Certificate of Status Desired   |  | Fee Required                             |  |
| City & State                                |  | City & State   |                          |                        | Election Campaign Financing     Trust Fund Contribution                              | 1 1  | 55.00 May Be<br>Added to Fees            |  |
| Zip   | Country  | Zip  | <del></del>              | intry                  | 8. This corporation has liability for in Florida Statutes                            | ntangible tax u                            |  |  |
| 24  | 25  <br>9. Name and Address of Curre   | 29<br>nt Registered Agent  | 30                       |                        | 10. Name and Address of New Reg  | L  |  |  |
| TOTA  | H, LAWRENCE L  |  |                          | 81 Name                | 1  |  |  |  |
| 12411 PATHWAY COURT 82                      |  |  |                          | 82 Street Add          | Address (PO, Box Number is Not Acceptable)   |  |  |  |
| RIVERVIEW FL 33569                          |  |  |                          |                        |  |  |  |  |
|   |  |  |                          | 83                     |  |  |  |  |
| ■ 84 City                                   |  |  |                          |                        |  | FL 85                                      | Zip Code                                 |  |
| office or reg<br>agent. I am<br>SIGNATURE   | gistered agent, or both, in the State<br>n familiar with, and accept the oblig | e of Florida. Such change was a<br>gations of, Section 607,0505, Flo | authorized<br>orida Stat | f by the corporat      | poration submits this statement for the pulion's board of directors. I hereby accept | irpose of chan<br>the appointme            | ging its registered<br>ent as registered |  |
| 12.   | signature, typied or printed name of registered ag<br>OFFICERS Af              | ND DIRECTORS   | 13,                      | c Agent signature requ | ADDITIONS/CHANGES TO OFFIC   | ****                                       | ECTORS IN 12                             |  |
| TITLE                                       | PTD  | DELETE   | 1.1 T                    | ITLE                   |  |  | ECTORS IN 12<br>Change Addition          |  |
| NAME  | TOTH, LAWRENCE L   |  | 12N                      | AME                    |  |  |  |  |
| STREET ADDRESS                              | 12411 PATHWAY COURT  |  |                          | TREET ADDRESS          |  |  | į  |  |
| CITY-ST-ZIP                                 | RIVERMEW FL<br>VSD   | DELETE   |                          | ITY-ST-ZIP             |  |  | Change Addition                          |  |
| TITLE<br>NAME                               | TOTH, EDNA   | [] DECEN   | 217                      |                        |  | Li   | Change [] Addition                       |  |
| STREET ADDRESS                              | 12411 PATHWAY COURT  |  |                          | TREET ADDRESS          |  |  |  |  |
| CITY-ST-ZIP                                 | RIVERVIEW FL.  |  |                          | CITY - S! - ZIP        |  |  |  |  |
| TITLE                                       |  | DELETE   | 3 1 T                    |                        |  |  | Change Add-tion                          |  |
| NAME  |  |  | 321                      | IAME                   |  |  | 1  |  |
| STREET ADDRESS                              |  |  |                          | TREET ADDRESS          |  |  |  |  |
| CITY-ST-ZIP                                 |  | DELETE   | 34 t                     | CHTY - ST - ZIP        |  |  | Change Addition                          |  |
| NAME  |  | [_] butt   |                          | YAME                   |  | لسا  |  |  |
| STREET ADDRESS                              |  |  | •                        | TREE I ADDRESS         |  |  |  |  |
| CITY-ST-ZIP                                 |  |  |                          | ITY-ST-ZIP             |  |  |  |  |
| TITLE                                       |  | DELETE   | 511                      | ITLE                   | 50000185<br>-07/12/960100<br>***225.00   | 12525                                      | hange Addition                           |  |
| NAME  |  |  |                          | IAME                   | -07/12/960100  | 57-JAB3                                    | Ì  |  |
| STREET ADDRESS                              |  |  |                          | STREET ADDRESS         | ***225.00  |  |  |  |
| CITY-ST-ZIP                                 |  | DELETE   |                          | CITY-ST-ZIP            |  | $\mathcal{A}$                              | Change Addition                          |  |
| TITLE<br>NAME                               |  |  |                          | IAME                   | $\sim$ 1   |  | a made [1] reduces                       |  |
| STREET ADDRESS                              |  |  |                          | STREET ADDRESS         | $\mathcal{O}$  | .*   |  |  |
| CITY - S1 - ZIP                             |  |  |                          | CITY-ST-ZIP            |  |  |  |  |

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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. SIGNATURE:

SIGNATURE AND YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/3/94 80-653-1413