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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

P93000009166 (8)

THE EDGE, INC.



Principal Place of I	Business	Mailing Adi	dress			<u>.</u> 1 <b>100/100 in 100 in 1</b>	111 <b>(1</b> 11 <b>11</b> 1		<b>    </b>
P.O. BOX 290993 TAMPA FL 33687  P.O. BOX 290993 TAMPA FL 33687									
(AMPA TO SO	•					3. Date Incorporated or Qualified 02/05/1993	3a. Da	te of Last Re <b>05/01/1</b> 9	port 195
2. Principal Place	of Business	2a. Mailing	Address		, y	4. FEI Number 59-3141821			pplied For lot Applicable
Suite, Apt. #, 6	etc.	26     Suite, .	Apt #, etc.			5. Certificate of Status Desired			Additional Required
City & State		City 8	State			Election Campaign Financing     Trust Fund Contribution		Added	May Be to Fees
Zip	Country 25	Z <sub>1</sub> p		Count	ry		es LLMo		199.032,
	9. Name and Address of Curr		Agent			10. Name and Address of New	Hegistere	o Agent	
	9, (10)			8	Name				
LUGO, I	israel Adamo dr.				Street Addr	ddress (P.O. Box Number is Not Acceptable)  FL 85 Zip Code  rporation submits this statement for the purpose of changing its registered office or of directors. Thereby accept the appointment as registered agent. I am			
2·B	ADVINO DIT.				13				
TAMPA	FL 33619				34 City				
SIGNATURES		ge taid the Papperson AND DIRECTORS	· · · · · · · · · · · · · · · · · · ·	13.	Agent signature respon	ADDITIONS/CHANGES TO C	DEFICERS A	ND DIRECT	ORS IN 12
TITLE	- <del>D</del>								
ii-ct			DELETE	1.170	1				
	YOUNKER, WILLIAM G		T neces	1.2 NA	ME				_
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certify that the information indicated on this annual report or supplemental annual report is troe and a course to be required by Chapter 607, 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, appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND PROPER PRINTED NAME OF SIGNING OFFICER OR DIRECTOR