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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

1. Corporation	MENI# P9300	10009694 (9	)			
	CIRCLE, INC.					
MAAL	SINGLE, INC.				4 10 0 11 0 0 11 11 11 11 11 11 11 11 11	MINI MANIA ESIAS ANIA IDAN ANAL IDAN
	·					
Principat Place of Business Mailing Ad-		Mailing Address			4 siddiader sid bonna stille Antel Maril Alltiff	tárir nasir finir áfrið hítir hiði röði
358 LAKE BRANTLEY CLUB PLACE			358 LAKE BRANTLEY CLUB PLACE			
LONGWOOD	FL 32779	LONGWOOD FL 32779				
						Date of Last Report
a Principal Pla	one of Business	2a. Mailing Address			02/08/1993 4. FEI Number	06/26/1995
2. Principal Place of Business 28. Mailing Address 26					65-3163765	Applied For Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						\$8.75 Additional
22 27			·		5. Certificate of Status Desired	Fee Required
City & State City & State					6. Election Campaign Financing	\$5.00 May Be
<b>Z</b> ip			Country		Trust Fund Contribution  8. This corporation has liability for intangility.	Added to Fees
24	25 29 30		<u> </u>		Florida Statutes Pes N	
	9. Name and Address of Currer	t Registered Agent			10. Name and Address of New Registe	red Agent
			81	Name		·
BERGMANN, ROLF 358 LAKE BRANTLEY CLUB PLACE			82	Street Addres	ss (P.O. Box Number is Not Acceptable)	
			93			
LONGW	OOD FL 32779		83			
			84	City		FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the ab				amed corooral		
or registere	ed agent, or both, in the Stale of Florid h, and accept the obligations of, Sect	da. Such change was authorize	d by the corpo	ration's board	of directors. I hereby accept the appointment	nt as registered agent. I am
SIGNATURE	in a transpir the rengant of our	er our rescept terrae executes.				
	Signature, typed or printed name of registered agent		E Registered Agent	signature required v		
TILE	OFFICERS AND DIRECTORS  Delete		13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12  Change Addition
NAME	BERGMANN, ROLF		1.7 NAME			C Change Macilion
STREET ADDRESS			1.3 STREET ADDRESS			
City-St-ZiP	LONGWOOD FL 32779		1.4 CITY - ST - ZIP			
TITLE	D DELETE		2 1 TITLE			Change Addition
NAME	BANKS, MARI C		22 NAME			
STREET ADORESS	***************************************		23 STREET A	ADDRESS		
CITY - ST - 7IP	LONGWOOD FL 32779		2.4 CHY-ST	- ZIP		Character Co. Later:
TITLE NAME	D DELETE SCHEVELING, MARTIN J		3 1 THTLE			Change Addition
NAME STREET ADDRESS	736 KIWI CIRCLE		3.2 NAME 3.3. STREET	ANDRESS		
CITY-ST-ZIP	WINTER PARK FL 32789		3.4 CITY- ST			
TITLE	D DELETE		4. 1 TITLE			☐ Change ☐ Addition
NAME	SCHEVELING, ELIZABETH D		4 2 NAME			
STREET ADDRESS	736 KIWI CIRCLE		4 3 STREET A	ADDRESS		
C(1y - S1 - ZIF	WINTER PARK FL 32789		4.4 CITY - ST	- ZIP		
THILE		☐ DELETE 5 11				Change Addition
NAME STOCK LABORESC			5 2 NAME	*PODECO		
STREET ADDRESS			5.3 STREET A			
CITY-\$1-ZIP TITLE	DELETE		5 4 CITY-ST 6 1 TITLE	- LIP		Change Addition
NAME		<u></u>	62 NAME			J
STREET ADDRESS			63 STREET A	ADDRESS		
CITY - \$1 - ZIP			6 4 CITY- ST			

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 of 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 on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OBLIGHING DAME OF SIGNING OFFICER OR DIRECTOR

Day TOPE DESCRIPTION NAME OF SIGNING OFFICER OR DIRECTOR

Day TIPE DAME OF SIGNING OFFICER OR DIRECTOR