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CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

| DOCUMENT # P93000012399 ( | 12399 (0) |
|---------------------------|-----------|
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| Principal Prace of Business Mailing Address 548 S. LONGYIEW PLACE 548 S. LONGVIEW PLAC SUITE 100 SUITE 100 LONGWOOD FL 32778 LONGWOOD FL 32779-6  |  |  |  |  |  | 3. Date Incorporated or Qu   |                                      | ate of Last R                        |   |
|---|--|--|--|--|--|--|--------------------------------------|--------------------------------------|---|
|   |  |  |  |  |  | 02/11/1993   |                                      | 24/1996                              | -y  |
| Principal P   | lace of Business   | 2a. Mailing  | Address                                    |  |  | 4. FEI Number  |                                      |                                      | plied For                                   |
| 0.3.4.4   | ш  | 26   |  |  |  | 59-3164219   |                                      |                                      | Applicabl                                   |
| Suite, Apt  | #, EIC.  | 27 Suite, Ap   | pt. #, etc.                                |  |  | 5. Certificate of Status Desi  | red 🔲                                | \$8.75 /<br>Fee Re                   |   |
| City & Stat   | €  | City & Si  | tate                                       |  |  | 6. Election Campaign Finan   | ncina                                | \$5.00                               | ··  |
|   |  | 28   |  |  |  | Trust Fund Contribution  |                                      | Added 1                              |   |
| Zιμ   | Country  | Zip  | C  | Country  | /  | 8. This corporation has liab   | ility for intangible                 | tax under s                          | 199.032,                                    |
| <u> </u>  | 25   | 29   |  | 30   |  | Florida Statutes   |                                      | No                                   |   |
|   | <ol><li>Name and Address of C<br/>RENSEN, MARY K</li></ol>                           | urrent Registered Age  | ent  | 81   | Name   | 10. Name and Address of h  | New Registered                       | Agent                                |   |
| SUIT  | S. LONGVIEW PLACE<br>TE 100<br>IGWOOD FL 32779                                       |  |  | 82<br>83<br>84   | City   | ress (P.O. Box Number is Not Ad  | FL                                   | •                                    | Code  |
|   | registered agent, or both, in the<br>im familiar with, and accept the                | State of Florida Such obligations of, Section                                    | Florida Statu<br>change was<br>607.0505, F | ites, the abov<br>authorized by<br>lorida Statute  | e-named corp<br>y the corpora<br>s.  | poration submits this statement f<br>tion's board of directors. I hereb  | or the purpose o<br>y accept the app | changing it<br>pointment as          | registered                                  |
| IGNATURE  | Supervise typed or printed name of register OFFICER                                  | red agent and title II applicable.<br>IS AND DIRECTORS                           | : (NC                                      | OTE: Regislered Ag   |  | poration submits this statement fition's board of directors. I herebired when reinstating)  ADDITIONS/CHANGES TO | DATE                                 | DIRECTOR                             | S IN 12                                     |
| GNATURE<br>2.   | Signature typed or printed name of registe OFFICER PSD                               | red agent and title II applicable.<br>IS AND DIRECTORS                           |  | TE: Registered Ag  |  | ired when reinstating)   | DATE                                 |                                      | S IN 12                                     |
| GNATURE<br>2.<br>ILE<br>ME  | Sign of the Especial pointed name of regicin OFFICER PSD SORENSEN, ROBERT J          | ored agent and title II applicable.<br>IS AND DIRECTORS                          | : (NC                                      | 13.<br>1.1 TITLE   |  | ired when reinstating)   | DATE                                 | DIRECTOR                             | S IN 12                                     |
| GNATURE LE ME REEL ADORESS  | Signature typed or printed name of registe OFFICER PSD                               | ored agent and title II applicable.<br>IS AND DIRECTORS                          | : (NC                                      | 13.<br>1.1 TITLE   | ent signature requi  | ired when reinstating)   | DATE                                 | DIRECTOR                             | S IN 12                                     |
| GNATURE  LE ME HEEL ADORESS Y-ST-ZIP  | PSD SORENSEN, ROBERT J 548 S. LONGWOOD FL VTD  | neo ageni and ulie II applicable.<br>IS AND DIRECTORS<br>[<br>E, SUITE 100       | : (NC                                      | TE: Registered AQ 13. 1.1 TITLE 1.2 NAME 1.3 STREET  | ent signature requi  | ired when reinstating)   | DATE                                 | DIRECTOR                             | S IN 12                                     |
| GNATURE  LE ME REEL AOORESS IY-S1-ZIP TE ME   | PSD SORENSEN, ROBERT J 548 S. LONGVIEW PLACE LONGWOOD FL VTD SORENSEN, MARY K        | neo ageri and ulie II applicable.<br>IS AND DIRECTORS  [E., SUITE 100            | DELETE                                     | 13. 1.1 TITLE 1.2 NAME 1.3 STREE! 1.4 CITY - 5 2.1 TITLE 2.2 NAME  | ent signature requi<br>T ADDRESS<br>ST - ZIP   | ired when reinstating)   | DATE                                 | DIRECTOR Change                      | S IN 12                                     |
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Apr 22 1997 8:00am

Secretary of State