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

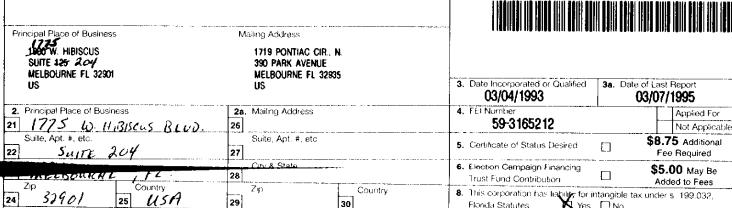
MITCHELL, PHILIP D

390 PARK AVENUE SATELLITE BEACH FL 32937

P93000016901 (9) DOCUMENT #

9. Name and Address of Current Registered Agent

PHILIP D. MITCHELL, P.A.



Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No 10. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City

03/07/1995

85

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Zip Code

Not Applicable

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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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SIGNATURE				
			Register of Agent Signature required	when weeking DATE
	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
THILE	D	DELETE	1 1 TITLE	Change Addition
NAME	MITCHELL, PHILIP D		1.2 NAME	
STREET ADDRESS	1719 PONTIAC CIRCLE NORTH		13 STREET ADDRESS	
CITY-ST-ZIP	MELBOORNE FL		1 4 C+TY - ST - Z+P	
TITLE		DELETE	2 1 TITLE	☐ Change ☐ Addition
NAME			2 2 NAME	[o lange [] Adotton
STREET ADDRESS			2.3 STREET ADORESS	
CITY-ST-ZIP			2.4 CITY - S1 - Z.P	
THILE		DELETE	3 1 THE	Chan Dadi
NAME		_	32 NAME	Change Addition
STREET ADDRESS			3.3 STREET ADDRESS	· ·
CITY-ST-ZIP			3.4 CITY - ST - ZIP	
TITLE		DELETE	4 1 11716	
NAME			4.2 NAME	☐ Change ☐ Addition
STREET ADDRESS			i i	}
CiTY+ST-ZIP			4.3 STREET ADDRESS	
TITLE		DELETE	4.4 CiTY+S1+ZIP 5.1 ITLE	
NAME				☐ Change ☐ Addition
STREET ADDRESS			5.2 NAME	
CITY-ST-7IP			5.3 STREET ADDRESS	
THE		DELETE	5 4 CITY - ST - ZIF	
NAME			6 1 TIFLE	Change 🔲 Addition
- 1			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY - ST - ZIP			6.4 City - ST- ZiP	

14. I do hereby certify that the information supplied with this filing is voluntarily turnished 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 appears in Block 12 or Block 13 if changed on an attachment with an address.

SIGNATURE: