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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT CIF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # P93000026133 (7)

PETER INDUSTRIES, INC.

Principal Place of Business 2770 NW 28TH TERRACE LAUDERDALE LAKES FL 33311

Maling Address

2770 NW 29TH TERRACE LAUDERDALE LAKES FL 33311



2. Principal P	Place of Business	**************************************	2a. Mailing Add	liones			Date Incorporated or Qualified 04/07/1993	3a. Date of Last 01/24/1	
21				26 Address		4. FEI Number		Applied For	
Suite, Apt. #, etc.			Suite, Apt. #	elc			65-0401480		Not Applicable
22				27		5. Certificate of Status Desired		5 Additional	
City & State			City & State				& Floating O	Fe	Required
23	-		28				Election Campaign Financing Trust Fund Contribution		00 мау Ве
Ζφ 24	ļ.,	Country	Zij)		Countr	у	8. This corporation has liability for in	Add	ed to Fees
24	25 Name and	Addi	29	30			Florida Statutes Yes	nangibie tax under □ No	s 199.032,
	5, Name and	Address of Curr	ent Registered Agent			·*·	10. Name and Address of New Re	gistered Agent	
LEAVY, LINDA					81	Name		g	
	LINDA N 29TH TERRA	^-			82 Street Addre		dress (P.O. Box Number is Not Acceptable)		
	MATE IANDO I								
LAUDER	DALE LAKES I	·L 33311			83				
					84				
44.5		· · · · · · · · · · · · · · · · · · ·						85 2	ip Code
or register	o ine provisions d ed agent, or both	TSections 607,050 on the State of Figure	2 and 607,1508, Florida	a Statutes, the	above	named corpu	oration submits this statement for the purp and of directors. Thereby accept the appoin	Ose of changing to	
familiar wit	h, and accept the	obligations of, Sec	rida. Such change was . Ition 607.0505, Florida s	aumorized by: Statutes	tne corp	oration's boa	uration submits this statement for the purp and of directors. I hereby accept the appoi	ntment as registere	registered offici diagent. Lam
SIGNATURE									
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NAME	LEAVY, PETI	ED .	[] DELE	īt i	1 1 THILE			Change	Addition
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certify that the information indicated by the hist sevoluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further oath, that I am an officer or direction of the composition or the receiver or trusted employeed to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

MATURE AND TYPED OR BRINTED NAME OF SIGNING OFFICER OR DIRECTE

4/25/96

800 - 883 - 794Z Daylinie Prone #