## 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

Principal Place (			Mailing Address								
944 S RIDGEWOOD AVE 944 S RIDGEWOOD AND DAYTONA BEACH FL 32114 DAYTONA BEACH FL 32114											
				2			3. Date Incorporated or Qua	lified (	3a. Date	of Last	Report
2. Principal Plac	no of Business						04/26/1993		(	03/07/	1995
21	oc or business	26	Mailing Address	5			4. FEI Number			T	Applied For
Suite, Apt. #,	, etc.		Suite, Apt. #, et	c.			59-3180000			603	Not Applicabl
2		27	·				5. Certificate of Status Desire	ed [	)		5 Additional Required
City & State			City & State				6. Election Campaign Finance	ing		\$5.	00 May Be
Zip	Country	28	Zip		unin.		Trust Fund Contribution			Add	ed to Fees
4	25	29	]	30	untry		8. This corporation has liability Florida Statutes	y for intai		k under :	s 199.032,
	9. Name and Address	s of Current Regis	stered Agent		<u> </u>		10. Name and Address of N			aent	<del></del>
					81 1	Name		-			
	, BRUCE				82 5	Street Addre	ess (P.O. Box Number is Not Acceptable)				
	RIDGEWOOD AVE										
DATIO	NA BEACH FL 32114				83						
					84 (	City				85 2	ip Code
11. Pursuant to	the provisions of Section	o 607 0500 and 60	2.1500 51-21-51		1 1 1	•			FL	1 1	
tamiliar with, SIGNATURE	, and accept the obligation	ons of, Section 607.	.0505, Florida Stat	tutes.	ove-nan corpora	med corpora ation's board	ation submits this statement for the dof directors. I hereby accept the	e purpos appointr		iging its egistere	registered officed agent. I am
familiar with, SIGNATURE Sig	, and accept the obligation	ons of, Section 607.	.0505, Florida Stat	(NOTE Registered	ove-nan corpora	med corpora ation's board	when reinstating)		e of char nent as r	egistere 	o agent. I am
faniliar with, SIGNATURE Sig 12.	, and accept the obligation grature, typed or printed name of a OFF	ons of, Section 607.	.0505, Florida Stat applicable CTORS	(NOTE Registered	ove-nam corpora Agent sig	med corpora ation's board	or allocators. Thereby accept the		e of char nent as r DATE RS AND I	DIRECT	ORS IN 12
taniliar with, SIGNATURE Sig 12.	, and accept the obligation gnature typed or printed name of a OFF	ons of, Section 607. registered agent and title in	.0505, Florida Stat	(NOTE Registered	Agent sig	med corpora ation's board	when reinstating)		e of char nent as r DATE RS AND I	egistere 	ORS IN 12
Taniliar with, SIGNATURE SIE 12.  TILLE IAME	graf re, typed or printed name of r OFF PSTD JANAN, RAYMON 11 ROBBEN TERF	ons of, Section 607.  registered agent and this it.  FICERS AND DIRECT	.0505, Florida Stat applicable CTORS	(NOTE Registered 13. 1.1 TH	Agent sig	med corpora ation's board	when reinstating)		e of char nent as r DATE RS AND I	DIRECT	ORS IN 12
SIGNATURE  SIGNATURE  12.  IIILE  VAME  STREET ADDRESS  LITY-S1-ZIP	, and accept the obligation graftire, typed or printed name of a OFF PSTD JANAN, FLAYMON	ons of, Section 607.  registered agent and this it.  FICERS AND DIRECT	.0505, Florida Stat applicable CTORS	NOTE Registered 13. 1.1 Ti 1.2 NA 1.3 ST	Agent sig	med corpora ation's board gnature required	when reinstating)		e of char nent as r DATE RS AND I	DIRECT	ORS IN 12
TAMILIAR WITH, SIGNATURE S	graf re, typed or printed name of r OFF PSTD JANAN, RAYMON 11 ROBBEN TERF	ons of, Section 607.  registered agent and this it.  FICERS AND DIRECT	.0505, Florida Stat applicable CTORS	NOTE Registered 13. 1.1 Ti 1.2 NA 1.3 ST	Agent signification of the comporation of the comporation of the component	med corpora ation's board gnature required	when reinstating)		e of char nent as r DATE RS AND I	DIRECT	ORS IN 12
TAMILIAR WITH, SIGNATURE  12.  THILE HAME STREEL ADDRESS CITY-S1-ZIP HAME HAME	graf re, typed or printed name of r OFF PSTD JANAN, RAYMON 11 ROBBEN TERF	ons of, Section 607.  registered agent and this it.  FICERS AND DIRECT	.0505, Florida Stat applicable CTORS	NOTE Registered 13. 1.1 TH 1.2 NA 1.3 ST 1.4 CH 2.1 TH	I Agent sig	med corpora ation's board gnature required	when reinstating)		e of char nent as r DATE RS AND I	DIRECT:	O agent. I am  ORS IN 12  Addition
TAMILIAR WITH, SIGNATURE  12.  THILE HAME STREET ADDRESS CITY-S1-ZIP HILE HAME HAME HAME HAME HAME HAME HAME	graf re, typed or printed name of r OFF PSTD JANAN, RAYMON 11 ROBBEN TERF	ons of, Section 607.  registered agent and this it.  FICERS AND DIRECT	.0505, Florida Stat applicable CTORS	NOTE Registered  13. 1.1 TH 1.2 NA 1.3 ST 1.4 CH 2.2 NA 2.3 STI	Agent signation of the comporation of the comporation of the comporation of the component o	med corpora ation's board gnature required  DRESS  DRESS	when reinstating)		e of char nent as r DATE RS AND I	DIRECT:	O agent. I am  ORS IN 12  Addition
TAMINIAR WITH, SIGNATURE  12.  THILE HAME STREET ADDRESS CITY-S1-ZIP HAME HAME THEET ADDRESS CITY-S1-ZIP	graf re, typed or printed name of r OFF PSTD JANAN, RAYMON 11 ROBBEN TERF	ons of, Section 607.  registered agent and this it.  FICERS AND DIRECT	.0505, Florida Stat	NOTE Registered  13. 1.1 TI 1.2 NA 1.3 ST 1.4 CT 2.2 NA 2.3 STI 2.4 CI	Agent signature I Agent signature ITLE AME REET ADD ITLE IME REET ADD ITY-ST-ZI	med corpora ation's board gnature required  DRESS  DRESS	when reinstating)		e of char ment as r DATE RS AND I	DIRECT Change	O agent. I am  ORS IN 12  Addition  Addition
TAMILIAR WITH, SIGNATURE  12.  THILE HAME STREET ADDRESS CITY-S1-ZIP HAME HAME TREET ADDRESS KIY-S1-ZIP JILE	graf re, typed or printed name of r OFF PSTD JANAN, RAYMON 11 ROBBEN TERF	ons of, Section 607.  registered agent and this it.  FICERS AND DIRECT	.0505, Florida Stat applicable CTORS	(NOTE Registered 13. 1.1 TI 1.2 NA 1.3 STI 2.2 NA 2.3 STI 2.4 CII 3.1 TI 1.3 TI	Agent signature I Agent signature ITLE AME REET ADD ITLE AME REET ADD ITLE ITLE ITLE ITLE ITLE ITLE ITLE ITLE	med corpora ation's board gnature required  DRESS  DRESS	when reinstating)		e of char ment as r DATE RS AND I	DIRECT:	O agent. I am  ORS IN 12  Addition
TAMILIAR WITH, SIGNATURE  12.  THE  THE  THE  THE  THE  THE  THE  TH	graf re, typed or printed name of r OFF PSTD JANAN, RAYMON 11 ROBBEN TERF	ons of, Section 607.  registered agent and this it.  FICERS AND DIRECT	.0505, Florida Stat	(NOTE Registered 13. 1.1 TI 1.2 NA 1.3 STI 2.2 NA 2.3 STI 3.1 TI 3.2 NA 3.3 NA	Agent signature I Agent signature ITLE AME REET ADD ITLE AME REET ADD ITLE ITLE ITLE ITLE ITLE ITLE ITLE ITLE	med corpora ation's board gradure required  ORESS PIP  DRESS	when reinstating)		e of char ment as r DATE RS AND I	DIRECT Change	O agent. I am  ORS IN 12  Addition  Addition
TAMINIAR WITH, SIGNATURE  12.  THE THE THE THE THE THE THE THE THE TH	graf re, typed or printed name of r OFF PSTD JANAN, RAYMON 11 ROBBEN TERF	ons of, Section 607.  registered agent and this it.  FICERS AND DIRECT	.0505, Florida Stat	(NOTE Registered 13. 1.1 TI 1.2 NA 1.3 ST 1.4 CIT 3.1 TI 1.2 NA 2.3 ST 1.4 CIT 3.1 TI 1.3 S NA 3.3 ST	Agent signation of the component of the	med corpora ation's board  practice required  DRESS  DRESS  DRESS	when reinstating)		e of char ment as r DATE RS AND I	DIRECT Change	O agent. I am  ORS IN 12  Addition  Addition
TAMILIAR WITH, SIGNATURE  12.  THE LAME STREET ADDRESS CITY-S1-ZIP THE LAME THEFT ADDRESS CITY-S1-ZIP THE	graf re, typed or printed name of r OFF PSTD JANAN, RAYMON 11 ROBBEN TERF	ons of, Section 607.  registered agent and this it.  FICERS AND DIRECT	.0505, Florida Stat	(NOTE Registered 13. 1.1 TI 1.2 NA 1.3 ST 1.4 CIT 3.1 TI 1.2 NA 2.3 ST 1.4 CIT 3.1 TI 1.3 S NA 3.3 ST	Agent signation of the component of the	med corpora ation's board  practice required  DRESS  DRESS  DRESS	when reinstating)		e of charment as r	DIRECT Change	O agent. I am  ORS IN 12  Addition  Addition
TAMINIAR WITH, SIGNATURE  12.  111.  112.  113.  114.  115.  116.  116.  117.	graf re, typed or printed name of r OFF PSTD JANAN, RAYMON 11 ROBBEN TERF	ons of, Section 607.  registered agent and this it.  FICERS AND DIRECT	.0505, Florida Stat applicable CTORS DELETE DELETE	(NOTE Registered 13. 1.1 TI 1.2 NA 1.3 ST 1.4 CIT 3.1 TI 1.2 NA 2.3 ST 1.4 CIT 3.1 TI 1.3 ST 1.4 CIT 3.4 CIT	Agent sig	med corpora ation's board  practice required  DRESS  DRESS  DRESS	when reinstating)		e of charment as r	OIRECT Change	DRS IN 12  Addition  Addition
TAMINIAR WITH, SIGNATURE  12.  111.	graf re, typed or printed name of r OFF PSTD JANAN, RAYMON 11 ROBBEN TERF	ons of, Section 607.  registered agent and this it.  FICERS AND DIRECT	.0505, Florida Stat applicable CTORS DELETE DELETE	(NOTE Registered 13. 1.1 Til 1.2 NA 1.3 ST 1.4 CIT 2.4 CIT 4.1 TII 4.2 NA 1.4 CIT 4.4 CIT	Agent sig	DRESS  DRESS  IP  DRESS  IP	when reinstating)		e of charment as r	OIRECT Change	DRS IN 12  Addition  Addition
Tarniliar with, SIGNATURE  12.  IIILE IAME TREET ADDRESS ITY-S1-ZIP IIILE AME TREET ADDRESS ITY-S1-ZIP ILE TREET ADDRESS ITY-S1-ZIP	graf re, typed or printed name of r OFF PSTD JANAN, RAYMON 11 ROBBEN TERF	ons of, Section 607.  registered agent and this it.  FICERS AND DIRECT	.0505, Florida Stat applicable CTORS DELETE DELETE	(NOTE Registered 13. 1.1 Til 1.2 NA 1.3 ST 1.4 CIT 4.2 CIT 4.3 ST 4.4 CIT 4.4	Agent signature of the component of the	DRESS  DRESS  DRESS  DRESS  DRESS	when reinstating)		DATE RS AND I	DIRECT: Change Change Change	DRS IN 12  Addition  Addition
TAMINIAR WITH, SIGNATURE  12.  12.  11LE  IAME  TREET ADDRESS  ITY-S1-ZIP  ITLE  AME  IREET ADDRESS  ITY-S1-ZIP  ILE  AME  IREET ADDRESS  IY-S1-ZIP  ILE  IREET ADDRESS  IY-S1-ZIP  ILE  IREET ADDRESS  IY-S1-ZIP  ILE	graf re, typed or printed name of r OFF PSTD JANAN, RAYMON 11 ROBBEN TERF	ons of, Section 607.  registered agent and this it.  FICERS AND DIRECT	.0505, Florida Stat applicable CTORS DELETE DELETE	(NOTE Registered 13. 1.1 Ti 1.2 NA 1.3 ST 1.4 CIT 4.1 TI 1.4 CIT 5.1 Ti 1.7 Ti	Agent signature of the component of the	DRESS  DRESS  DRESS  DRESS  DRESS	when reinstating)		DATE RS AND I	OIRECT Change	DRS IN 12  Addition  Addition
TANDINAT WITH,  SIGNATURE  12.  11LE  IMME  TREET ADDRESS  ITY-S1-ZIP  TILE  AME  IREET ADDRESS  ITY-S1-ZIP  TILE  AME  IREET ADDRESS  IY-S1-ZIP  ILE  AME  IREET ADDRESS  IY-S1-ZIP  ILE  IME  IME  IME  IME  IME  IME  IME	graf re, typed or printed name of r OFF PSTD JANAN, RAYMON 11 ROBBEN TERF	ons of, Section 607.  registered agent and this it.  FICERS AND DIRECT	.0505, Florida Stat applicable CTORS DELETE DELETE	(NOTE Registered 13. 1.1 Ti 1.2 NA 1.3 ST 1.4 CIT 1.1 Ti 1.2 NA 1.3 ST 1.4 CIT 1.5 2 NA 1.4 CIT 1.5 2 NA 1.5 CIT 1.	Agent signature of the comporation of the composition of the compositi	ORESS IP  DRESS IP  DRESS P	when reinstating)		DATE RS AND I	DIRECT: Change Change Change	DRS IN 12  Addition  Addition
TANDINAT WITH, SIGNATURE  12.  IIILE IAME TREET ADDRESS ITY-SI-ZIP TILE AME TREET ADDRESS ITY-SI-ZIP TILE AME TREET ADDRESS ITY-SI-ZIP TILE AME TREET ADDRESS TY-SI-ZIP TILE TREET ADDRESS	graf re, typed or printed name of r OFF PSTD JANAN, RAYMON 11 ROBBEN TERF	ons of, Section 607.  registered agent and this it.  FICERS AND DIRECT	.0505, Florida Stat applicable CTORS DELETE DELETE	(NOTE Registered 13. 1.1 Tr 1.2 NA 1.3 ST 1.4 Cr 1.7 ST 1.4 Cr 1.7 ST 1.4 Cr 1.7 ST 1.4 Cr 1.7 ST 1.7 ST 1.4 Cr 1.7 ST 1.7 ST 1.4 Cr 1.7 ST 1.	Agent signation of the component of the	ORESS UP  DRESS P  DRESS P	when reinstating)		DATE RS AND I	DIRECT: Change Change Change	DRS IN 12  Addition  Addition
TANDINAT WITH, SIGNATURE  12.  111.	graf re, typed or printed name of r OFF PSTD JANAN, RAYMON 11 ROBBEN TERF	ons of, Section 607.  registered agent and this it.  FICERS AND DIRECT	.0505, Florida Stat applicable CTORS DELETE DELETE	(NOTE Registered 13. 1.1 Tr 1.2 NA 1.3 ST 1.4 Cr 1.7 ST 1.4 Cr 1.7 ST 1.4 Cr 1.7 ST 1.4 Cr 1.7 ST 1.7 ST 1.4 Cr 1.7 ST 1.7 ST 1.4 Cr 1.7 ST 1.	Agent signation of the comporation of the comporation of the component of	ORESS UP  DRESS P  DRESS P	when reinstating)		DATE RS AND I	OIRECT: Change Change Change	ORS IN 12  Addition  Addition  Addition
TAMINIAR WITH, SIGNATURE  12.  11ILE IAME ITHEET ADDRESS ITY-ST-ZIP ITHE ITHEET ADDRESS ITY-ST-ZIP	graf re, typed or printed name of r OFF PSTD JANAN, RAYMON 11 ROBBEN TERF	ons of, Section 607.  registered agent and this it.  FICERS AND DIRECT	.0505, Florida Stat applicable CTORS DELETE DELETE DELETE	(NOTE Registered 13. 1.1 Ti 1.2 NA 1.3 ST 1.4 CIT 5.1 Til 5.2 NA 5.3 STR 5.4 CIT 5.4 C	Agent signation of the comporation of the comporation of the component of	ORESS UP  DRESS P  DRESS P	when reinstating)		DATE RS AND I	DIRECT: Change Change Change	DRS IN 12  Addition  Addition
TAMILIAR WITH, SIGNATURE SIGNATURE 112.  SITILE STREET ADDRESS STREET ADDRESS	graf re, typed or printed name of r OFF PSTD JANAN, RAYMON 11 ROBBEN TERF	ons of, Section 607.  registered agent and this it.  FICERS AND DIRECT	.0505, Florida Stat applicable CTORS DELETE DELETE DELETE	(NOTE Registered 13. 1.1 Tr 1.2 NA 1.3 ST 1.4 Cr 1.7 ST 1.	Agent signature of the comporation of the composition of the compositi	DRESS IP DRESS P PRESS P	when reinstating)		DATE RS AND I	OIRECT: Change Change Change	ORS IN 12  Addition  Addition  Addition

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR JANSA 4-26-96 SIGNATURE:

604)258.8384