

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

|                                             |                                                                                   |                                                                                                    |
|---------------------------------------------|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|
| PROFIT CORPORATION<br>ANNUAL REPORT<br>1996 |  | FLORIDA DEPARTMENT OF STATE<br>Sandra B. Mortham<br>Secretary of State<br>DIVISION OF CORPORATIONS |
|---------------------------------------------|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|

FILED

96 OCT 25 PM 3:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000036353**  
1. Corporation Name **YEO ENTERPRISES INC.**

Principal Place of Business Mailing Address  
**1272 S.W. EVERGREEN LN 1272 S.W. EVERGREEN LANE**  
**PALM CITY FLA PALM CITY, FLA**  
**34990-1911 34990-1911**

|                                                                                           |                                                                                |
|-------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|
| 2. Principal Place of Business<br>21 <b>1272 S.W. EVERGREEN LN</b><br>Suite, Apt. #, etc. | 2a. Mailing Address<br>26 <b>1272 S.W. EVERGREEN LN</b><br>Suite, Apt. #, etc. |
| 22 <b>PALM CITY FLA</b><br>City & State                                                   | 27 <b>PALM CITY FLA</b><br>City & State                                        |
| 23 <b>34990</b><br>Zip                                                                    | 28 <b>USA</b><br>Country                                                       |
| 24 <b>34990</b><br>Zip                                                                    | 29 <b>USA</b><br>Country                                                       |

|                                                                                                                                                     |                                |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|
| 3. Date Incorporated or Qualified<br><b>5/17/93</b>                                                                                                 | 3a. Date of Last Report        |
| 4. FE Number<br><b>65-0416357</b>                                                                                                                   | Applied For<br>Not Applicable  |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                           | \$8.75 Additional Fee Required |
| 6. Election Campaign Financing<br>Trust Fund Contribution <input type="checkbox"/>                                                                  | \$5.00 May Be Added to Fees    |
| 8. This corporation has liability for intangible tax under s. 199.032,<br>Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No |                                |

9. Name and Address of Current Registered Agent  
**FREDERICK A. YEO**  
**3077 S.E. DIXIE HIGHWAY**  
**STUART FLA 34997**

|                                                                                          |
|------------------------------------------------------------------------------------------|
| 10. Name and Address of New Registered Agent                                             |
| 81 Name <b>FREDERICK A. YEO</b>                                                          |
| 82 Street Address (P.O. Box Number is Not Acceptable)<br><b>1272 S.W. EVERGREEN LANE</b> |
| 83 <b>PALM CITY FLORIDA</b>                                                              |
| 84 City <b>FL</b>                                                                        |
| 85 Zip Code <b>34990-1911</b>                                                            |

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 or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE **FREDERICK A. YEO PRES.** *Frederick A. Yeo* DATE **8/12/96**

|                                                    |                                                                                                                               |
|----------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|
| 12. OFFICERS AND DIRECTORS                         | <input type="checkbox"/> DELETE                                                                                               |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | <b>PRESIDENT</b><br><b>FREDERICK A. YEO</b><br><b>1272 S.W. EVERGREEN LN</b><br><b>PALM CITY FLA 34990</b>                    |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | <b>VICE PRESIDENT &amp; SECRETARY</b><br><b>WILLIAM R. YEO</b><br><b>1272 S.W. EVERGREEN LN</b><br><b>PALM CITY FLA 34990</b> |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | <input type="checkbox"/> DELETE                                                                                               |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | <input type="checkbox"/> DELETE                                                                                               |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | <input type="checkbox"/> DELETE                                                                                               |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | <input type="checkbox"/> DELETE                                                                                               |

|                                                       |                                                                   |
|-------------------------------------------------------|-------------------------------------------------------------------|
| 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 11 TITLE                                              |                                                                   |
| 12 NAME                                               |                                                                   |
| 13 STREET ADDRESS                                     |                                                                   |
| 14 CITY - ST - ZIP                                    |                                                                   |
| 21 TITLE                                              |                                                                   |
| 22 NAME                                               |                                                                   |
| 23 STREET ADDRESS                                     |                                                                   |
| 24 CITY - ST - ZIP                                    |                                                                   |
| 31 TITLE                                              |                                                                   |
| 32 NAME                                               |                                                                   |
| 33 STREET ADDRESS                                     |                                                                   |
| 34 CITY - ST - ZIP                                    |                                                                   |
| 41 TITLE                                              |                                                                   |
| 42 NAME                                               |                                                                   |
| 43 STREET ADDRESS                                     |                                                                   |
| 44 CITY - ST - ZIP                                    |                                                                   |
| 51 TITLE                                              |                                                                   |
| 52 NAME                                               |                                                                   |
| 53 STREET ADDRESS                                     |                                                                   |
| 54 CITY - ST - ZIP                                    |                                                                   |
| 61 TITLE                                              |                                                                   |
| 62 NAME                                               |                                                                   |
| 63 STREET ADDRESS                                     |                                                                   |
| 64 CITY - ST - ZIP                                    |                                                                   |

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 or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Frederick A. Yeo* **FREDERICK A. YEO** 7/31/96 467-286-3679

CR2E034 (3/96)