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PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Feb 25 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000037867 (7)

OLIPRA-SUN, INC.

						· · · · · · · · · · · · · · · · · · ·				
Principal Place 3854 SUN CITY RUSKIN FL 335 US	CENTR BLVD	861 HARBOF #19A	Mailing Address 861 HARBOR ISL #19A CLEARWATER FL 34830-1807 US					inina istit andat tali	, 4 1111 t	40 1 153 1
		US					3. Date Incorporated or Qualified			
	face of Business	2a. Mailing	Address				4. FEI Number	<u> </u>	App	plied For
Suite, Apt	# ote	26 Suite A	pt. #. etc.				59-3192553	***		t Applicable
22	11, 6307.	27					5. Certificate of Status Desired			
City & Stat	.e	ļ	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country		Zip Country				This corporation has liability for intangible tax under s. 199.032,			
24	25				·		Florida Statutes Yes No			
	g. Name and Address of	Current Registered Ag	ent				10, Name and Address of New Reg	istered Agent		
	YRA, KENNETH A			į	81	Name				
	HARBOR ILS ARWATER FL 34630			ľ	82	Street Addre	ess (P.O. Box Number is Not Acceptable	e)		
CLE	ARWAIEN FL 34030			-	83					
				-	84	City	 	Toel	Zip C	lodo.
					D4	City		FL 85	zip C	Jode
office or r	registered agent, or both, in the im familiar with, and accept the Signature, typed or puriest name of regis	a State of Florida, Such a obligations of, Section	change was 607.0505, F	authorized Torida Statu	l by Ites	the corporati	oration submits this statement for the pi on's board of directors. I hereby accep	the appointme	nt as r	registered
12.		RS AND DIRECTORS	(10	13.		ni signatura regare	ADDITIONS/CHANGES TO OFFICE		TOR	S IN 12
Titt	P		DELETE	1.1 101	LE			☐ Cha		Addition
NAME	OLIPRA, KENNETH A			1.2 NA	ME					
STREET ADDRESS	861 HARBOR ISL			1.3 STF	REET .	ADDRESS				
CITY-ST-7F	CLEARWATER FL			1.4 CIT		T-ZIP				
TITLE		Ĺ	DELETE	2.1 1/1				[] Cha	ange	Addition
NAME PROFEST ADDRESSE				. 2.2 NAJ		*DODEÇO				
STREET ADDRESS : CITY+ST+24F				2.3 ST		ADDRESS				."
1:11 F	2174F12 - 14 11151 1995 141 H. S. T. SILSVERVICTERS SECRESSIS A 5745	The first state of the state of	DELETE	3.1 T/T		II. TH		☐ Cha	ange	Addition
NAME				3.2 NA	ME				•	
STREET ADDRESS				3.3 STF	REET	ADDRESS				
CITY-ST-7IF				3.4. CI	TY-S	T-ZIP				
THILE		[DELETE	4.1 TiT				Cha	ange	Addition
NAME				4. 2 NA						
STREET ADORESS						ADDRESS				
CITY-ST-ZIF			DELETE	4.4 CIT		T- ZIP		☐ Cha	2000	Addition
TITLE NAME		L	d DLCLIL	5.1 T(T) 5.2 NAI				GR	n Ng	Admitors
STREET ADDRESS						ADDRESS				
CITY ST - 20°				5.4 CIT						į
TITLE			DELETE	6.1 TIT	_	,		Cha	inge	Addition
NAME		•		6.2 NAJ					-	
STREET ADORESS						ADDRESS				
CITY-ST-ZIP				6.4 CIT	Y-\$1	T-ZIP				
14. I do here	by certily that the information s	upplied with the filing o	loes not qua	lify for the e	exer	mption stated	in Section 119.07(3)(i), Florida Statutes	I further certify	that t	he los path: the
Lam an o appears i	of molecular on this armula repartition or director of the corporation Block 12 or Block 13 if chart	nion or the receiver or to ged or franzitachme	ruste empo it win an ac	wered to eaddress.	XBCI	ute this report	in Section 119.07(3)(i), Florida Statutes my signature shall have the same legal I as required by Chapter 607, Florida St	atutes; and that	my na	ame