## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

appears in Block 12 or Block



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 16 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000039998 (8)

TREWORGY ENTERPRISES, INC.

Commons   Comm	28062A MITC) Punta Gord US		28062-A MITCHELL PUNTA GORDA FL 33982-17	763					
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SAID APL #, etc.    SAID APL #, etc.   SAID APL #, etc.   S. Conflictation of Status Desired   S8.75 Additional Fee Required	2. Principal	Place of Business	2a. Mailing Address	2a. Mailing Address				<del>                                     </del>	
City & State   City	21		no paint as		NOT APPLICABLE				
Country Zip Country Zip Country Registered Agent Trust Fruind Contribution	<del>-</del> 7		<u> </u>		I h Certificate of Status Desired				
Zip Country Zip Country Zip Country 8. This proposition has fability for intengible tax unders in 190 002, Prioride Statutes [	City & St	ato	***************************************						
Zip Country Zip Country Zip Country B. This corporation has liability for intengible tex under s. 199.002; priorise statutes — Yes Zi No.  9. Name and Address of Current Registered Agent  TREWOREY, RICK 28082-A MITCHELL AVE PUNTA GORDA FL 33950  8. Sirvert Address (P. D. Box Number is Not Acceptable)  8. City FL 85 Zip Code  9. City FL 85 Z	23	ate	·····						
9. Name and Address of Current Registered Agent TREWOREY, RICK 28082A MITCHELL AVE PUNTA GORDA FL 33950  10. Name and Address of New Registered Agent TREWOREY, RICK 28082A MITCHELL AVE PUNTA GORDA FL 33950  11. Pursuant to the previsions of Scalaris 607 0502 and 607 1508, Florids Statutes, the above named corporation submits his statement for the purpose of changing its registered director registered agent, or both, in the State of Florids. Such change was authorized by the corporations submits his statement for the purpose of changing its registered office or registered agent, or both, in the State of Florids. Such change was authorized by the corporations submits his statement for the purpose of changing its registered office or registered agent, or both, in the State of Florids. Such change was authorized by the corporations submits his statement for the purpose of changing its registered agent and registered agent agent are previously accept the appointment as registered agent agent are previously accept the appointment as registered agent agent are previously accept the appointment as registered agent agent are previously accept the appointment as registered agent		Country		Countr	·v				
9. Name and Address of Current Registered Agent  TREWOREY, RICK 28082A MITCHELL AVE PUNTA GORDA FL 33950  82 Street Address (P.O. Box Number is Not Acceptable)  83 Superior Address (P.O. Box Number is Not Acceptable)  84 City FL 85 Zip Code 65 City FL 85 Zip Code 66 City FL 85 Zip Code 67 City FL 85 Zip Code 68 City FL 86 Zip Code 68 Zip Co	4	<u>├</u> ┐ ´							
Beautiful Companies				<del>50</del> 1					
28082-A MTCHELL AVE PUNTA GORDA FL 33950  8	TR	EWOREY, RICK		81	Name		<u> </u>		***************************************
PUNTA GORDA FL 33950  84 City FL 85 Zip Code  11. Parament to the processors of Sections 607 0500 and 607 1500 Florers Statutes. The above-named corporation submits this statement for the purpose of changing its registered agent. Jean tentiliar with, and accept the obligations of Section 607 0505, Florida Statutes.  In Parament to the processors of Sections 607 0500 Florers Subtitutes the corporation's board of directors. Thereby accept the appointment as registered agent. Jean tentiliar with, and accept the obligations of Section 607 0505, Florida Statutes the corporation's board of directors. Thereby accept the appointment as registered agent. Jean tentiliar with, and accept the obligations of Section 607 0505, Florida Statutes the corporation's board of directors. Thereby accept the appointment as registered agent. Jean tentiliar with, and accept the obligations of Section 607 0505, Florida Statutes the corporation's board of directors. Thereby accept the appointment as registered agent. Jean tentiliar with, and accept the obligations of Section 607 0505, Florida Statutes the corporation's board of directors. Thereby accept the appointment as registered agent. Jean tentiliar with, and accept the appointment as registered agent. Jean tentiliar with a processor of Change   Addition 11 of The Corporation of Change   Addition 11 of Thereby accept the appointment as registered agent. Jean tentiliar with a processor of Change   Addition 11 of Thereby accept the appointment as registered agent. Jean tentiliar accept the appointment as registered agent. Jean tentiliar accept the appointment as registered agent. Jean tentiliar accept the corporation accept the appointment as registered accept the corporation accept the appointment as registered accept the appointment as registered accept the appointment as registered accept the corporation accept the appointment as registered accept the appointment as regist				-	N 01 1 1 1 1 1	(D O D . )	(-)		
Bay				84	Sireet Add	ress (P.O. Box Number is Not Acceptac	ie)		
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11. Pursuant to the previsions of Sections 607 (0502 and 607 1506; Fordica Statutes, the above-named corporation submits this statement for the purpose of changing its registere diffice or registered agent. I am familiar with, and accept the obligations of, Section 607 (0505, Florida Statutes).    Control   Contr				84	City		FI 85	Zip C	ode
AGENTALISE    Control   C	11. Pursuan	nt to the provisions of Sections 607.05 riccijstered agent, or both, in the Sta	502 and 607 1508, Florida Statute te of Florida, Such change was a	s, the about	ve-named cor	poration submits this statement for the p	urpose of char	nging its	registered
Committee   Comm	agent. I	am familiar with, and accept the obli	igations of, Section 607,0505, Flo	rida Statute	∋s.	,			-9
PSTD	SIGNATURE	Signature Type diculprotect came of high-lefted a	agent and title Tapphoable (NOTE	: flegistered A	gent signature requ	sited when reinstating)	DATE		
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14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this argual report of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as if made under oath: the same legal effect as	CITY - ST-ZIP								···
	14. I do her informa	reby certify that the information suppli- it on indicated on this argural record of	lied with this filling does not qualif	ly for the ex	emption state	ed in Section 119.07(3)(i), Florida Statute at my signature shall have the same lega	s. I further cert	ify that that	he ier oath: the