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

DOCUMENT # P93000043014 (8) 1. Corporation Name

BI-SHER CORPORATION

Principal Place of Business 2211 ENGLEWOOD ROAD ENGLEWOOD FL 34223

Mailing Address

2211 ENGLEWOOD ROAD ENGLEWOOD FL 34223



0.0:					3. Date Incorporated or Qualified 06/09/1993	3a. Date	of Last 1/04/1	
21 Principa! Pl	ace of Business	28. Mailing Address	2a. Mailing Address		4. FEI Number			Applied For
Suite, Apt.	# otc	26			65-0419688			Not Applicable
22	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	*	\$8.7	75 Additional
City & State	3	27				<i></i>	Fe	e Required
23	,	City & State			6. Election Campaign Financing	_ 	\$5.	00 May Be
Zip	Country	Zip	Country		Trust Fund Contribution		Add	ded to Fees
24	25	29	30		8. This corporation has liability for i		x under	s 199.032,
	9. Name and Address of Current Registered Agent			Florida Statutes Yes No 10. Name and Address of New Registered Agent				
				81 Name				
BARCO, CARROLL S			Ll					
	OUTH ORANGE BLOSSOM	TR	82 Street Addres		ess (P.O. Box Number is Not Acceptable	e)		
SUITE 1		116						-
	O FL 32809							
	7 7 1 02000		84 (City			85	Zip Code
11. Pursuant to	o the provisions of Sections 607	0502 and 607 1509 Florida Ctat	40-40-51			<u> </u>	1 1	,
or registere familiar wit	ed agent, or both, in the State of h, and accept the obligations of	f Florida. Such change was author Section 607,0505. Florida Statute	ized by the corpora	tion's board	ation submits this statement for the purp d of directors. I hereby accept the appo	cose of char intment as i	nging its registere	; registered officed agent. I am
SIGNATURE _	,	, educari edir. oddo, r ichoa biaitik	55.					_
	Signature, typed or printed name of registered	d agent and little if applicable (f	NOTE Registered Agent sig	nature required i	When reinstatinol	DATE		
12.		S AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		DIRECT	OBS IN 12
Till E	D	DELETE	1. 1 THILE			· · · · · · · · · · · · · · · · · · ·	Change	
NAME	MCGILL, W. F.		1.2 NAME			-	,	
STHEET ADDRESS	2211 ENGLEWOOD ROA	/ D	1.3 STREET ADD	RESS				
CITY-ST-ZIP	ENGLEWOOD FL 34223		1.4 CITY - \$1 - 2i	p				
TITLE	D	☐ DELETE	2 1 TITLE				Change	Addition
NAME	MCGILL, SHERRY J		2.2 NAME				D-lange	L) Madition
STREET ADDRESS	2211 ENGLEWOOD ROA	ND .	2.3 STREET ADD	RESS				
CITY - ST - ZIP	ENGLEWOOD FL 34223		2 4 C(1Y - S1 - Z(,				
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NAME			3.2 NAME			L.J	Orlange	L Addition
STREET ADDRESS			3.3. STREET ADD	RESS		•		
CITY-ST-ZIP			3.4 CITY - ST - ZII					
TITLE		DELETE	4. 1 Title			- 	Change	☐ Addition
NAME			4.2 NAME			Ь	onunge	Addition
			4.3 STREET ADD	RESS.				
STREET ADDRESS								
			_					
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CITY-ST-ZIP		☐ DELETE	4.4 CHY-ST-ZIF 5 1 TITLE				Change	Addition
CIFY-ST-ZIP TITLE NAME		☐ DELETE	4.4 C/TY - ST - Z/F 5.1 T/TLE 5.2 NAME				Change	Addition
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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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

William F Mc Gill 4/13/96 941-475-7266
OFFICER OR DIRECTOR