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 ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE. Sandra B. Mortham

Secretary of State

1	996	DIVISION OF COF	PORATIONS			
DOCUM 1. Corporation f	IENT # P930	00051441 (2)				
PUMP'N	INC.			L 1204/60) AND HOUSE WHILE COMP COMP COMP	A BELIAN BINDIN NIBIN DIBIN DIBER NIBIN 1800.	
Principal Place	of Pucinose	Mailing Address				
rincipai Place i	OL D'ARITIGS?					
H33 N.E. 26TH		2133 N.E. 26TH ST. FT. LAUDERDALE FL 33305				
ft. Lauderdal	LE PL 38300	The property of a second		3. Date Incorporated or Qualified	3a. Date of Last Report	
				07/22/1993	08/07/1995	
Principal Pla	ace of Business	2a. Mailing Address		4, FEI Number	Applied For Not Applicable	
j		26		65-0420396	\$8.75 Additional	
Suite, Apl. #	, etc	Suite, Apt. #, etc.		Certificate of Status Desired	Fee Required	
		Cutu & State		6. Election Campaign Financing	\$5.00 May Be	
City & State		City & State		Trust Fund Contribution	Added to Fees	
7:0	Country	Ζφ	Country	8. This corporation has liability for	ntangible lax under s. 199 032,	
Zip I	25	F	0	Florida Statutes	Yes No	
L	9. Name and Address of C			10. Name and Address of New Re	gistered Agent	
DCD			81 Name			
DERUSHA, JIM 2133 N.E. 26TH ST.			82 Street Add	2 Street Address (P.O. Box Number is Not Acceptable)		
FT. LAUDERDALE FL 33305						
1 1.	DADELIDACE I E COCCO		83			
			B4 City		FL 85 Zip Code	
CICALATURE		_	da Statules Fugoterea Agent signal ne requ	poration submits this statement for the plann's board of directors. Thereby accept	CATt	
	Signature type disclorer or discovered frequity	RS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12	
12. Tifle	DPS	DELETE	1.1 TITLE		Change Addition	
NAME	DERUSHA, JIM		1.2 NAME			
STREET ADDRESS	2133 N.E. 26TH ST.		1 3 STREET ADDRESS			
CITY - ST - ZIP	FT. LAUDERDALE FL		1.4 CITY - \$1 - 2IP		Change Addition	
TITLE		DELETE	21 THLE		Griange Addition	
NAME			2 2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP		T or cre	2 4 CITY - S1 - ZIP		Change Addition	
THILE		DELETE	3 1 TALE 3 2 NAME			
NAME			3 3 STHEET ADDRESS			
STREET ADDRESS	-		3.4 CITY-ST ZIP			
CITY-ST-ZIP TITLE		DELETE	4 1 THE		Change Addition	
NAME			4 2 NAME			
STREET ADDRESS			4 3 STREET ADDRESS			
CITY-ST-ZiP			4.4.CITY - ST - ZIP		Change Addition	
TITLE		DELETE	51 TITLE		Change Additi	
NAME			5.2 NAME			
STREET ADDRESS			5 3 STREET ADDRESS			
City - St - ZiP		DELETE	5 4 CITY - ST - ZIF		Change Add tie	
TITLE		DELETE	6 TITLE		<u> </u>	
NAME	1		6.2 NAME			

64 CITY-S1-7IP

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 attachgient with an address

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPED OR PAINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAMES K. DERUSHA C-18-96 951-566.8995