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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9300053662 (1)

ANKER, INC.

1/36 03 044 35000362

**FILED** 

Jun 03 1997 8:00am

Secretary of State

Principal Place of Business Mailing Address							f ibbitabi ith tainn liiti entit naitt ma		T IIII WIII WEIII	1 1191 1991		
1690 DUNN AV	E		1690 DUNN AVE									
APT 822 DAYTONA BEACH FL 32114				APT 822 DAYTONA BEACH FL 32114-1478								
			DATIONA DENOTITE SELISTATO			3	<ol> <li>Date Incorporated or Qualified 07/26/1993</li> </ol>					
2. Principal P	lace of Busine	uss	2a. Mailing Add	ress				I. FEI Number			oplied For	
21			26					59-3192561			t Applicable	
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				- 1-			\$8.75	Additional	
22			27				5	5. Certificate of Status Desired Fee Required				
City & Stat	0		City & State				6	6. Election Campaign Financing \$5.00 May Be			May Be	
23							1	Trust Fund Contribution Added to Fees				
Zip		Country	Zqr		Country		8	8. This corporation has liability for intangible tax under s. 199.032,				
24	25				30			Florida Statutes				
	<del></del> -	and Address of Curre	ent Registered Agent		81	T	10	). Name and Address of New R	legistered	Agent		
FULLER, DAVID D JR						Name						
	RIDGEWOO	D AVENUE			62	2 Street Addres		ss (P.O. Box Number is Not Acceptable)				
STE					-	ļ					<u></u>	
DAY	TON BEACH	1 FL 32114			83	1						
					84	City				<b>85</b> Zip (	Code	
					!_	l				<u> </u>		
office or a agent. I a	to the provision registered ago am familiar wit	ons of Sections 607.05 ont, or both, in the Stat h, and accept the obli	iuz and 607,1508, Flori le of Florida, Such chai gations of, Section 607	ida Statutes, th nge was author 1.0505, Florioa	e abov rized b Statule	re-named y the corp is.	corporati poration's	ion submits this statement for the board of directors. I hereby acc	purpose c ept the app	pointment as	registered	
SIGNATURE										•		
	Signature, typed o	or printed name of repetered as				ent signature	required who	en reinstabing)	DATE			
12.		OFFICERS A	ND DIRECTORS		13.			ADDITIONS/CHANGES TO OFF	ICERS AN	D DIRECTOR  Change	RS IN 12	
TITLE	PD ANIVED IV	ÆÐ I	L1 1/	i	L1 TITLE		ļ			L_1 Citalige		
NAME	ANKER, IV	IN AVE #822				1.2 NAME						
STREET ADDRESS		BEACH FL 32114		1	1.3 STREET ADDRESS							
CITY-ST-ZIP	DATIONA	DEAUN FL 32114								Chause	Addition	
TITLE			ں وے	Ħ	21 TITLE					Change	[_] Modificit	
NAME					2.2 NAME							
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CITY-ST-ZIP	ļ			<del></del>	2. 4 CITY	\$1-717	<del> </del>	····· · · · · · · · · · · · · · · ·		Change	Addition	
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NAME				1	B.2 NAME	Linneren						
STREET ADDRESS						LADORESS						
CITY-ST-ZIP	<del> </del> -				4 CITY	51-7IF	ļ			Change	Addition	
TOLE			<b></b> 0		1. 2 NAME					Onange	Addition	
NAME	<u> </u>											
STREET ADDRESS						LADDRESS						
CITY - ST - ZIP TITLE	<del> </del>				4.4 CHY- 5.1 THE	21 · ZIF				Change	Addition	
			(, t		5.2 NAME							
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STREET ADDRESS						1 ADDRESS						
CITY-ST-ZIP TITLE	<del> </del>				5.4 CITY - 5.1 THEF	51-7IP				Change	Addition	
			L_J 11							0.10118/		
NAME						6.2 NAME 6.3 STREET ADDRESS						
STREET ADDRESS	1			<b>.</b>	5.3.2 LRFF	1 MUDRI 95	1					

14. Ido hereby certify that the information supplied with this fitting does not qualify for the exempton stated in Section 119.07(3)(i), 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 logal offect as if made under eath, 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.

6.4 C/TY-ST-2/P

CITY-ST-ZIP