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



• PRC CORPO ANNUAL • 19	ration Report		FLORIDA DEPARTMENT OF STATE Bandra B7 Mortham Secretary of State DIVISION OF CORPORATIONS		May 01 1997 8:00am Secretary of State			
DOCUME 1 Commences Name		alation						
	12608		ling Address					
High Springs, F132643					3. Date Incorporated or Qualified 3a. Date of Last Report			
2. Percepti Pace (if Business	2s. 1	Mailing Address	2608	4. FEI Number		pplied For lot Applicable	
Suite Ap" # etc Suite, Apt #, etc 27					5. Certificate of Status Desired	\$9.75 Additional		
City 8 State	SORINAS	F 28	City & State	since F1	Election Campaign Financing Trust Fund Contribution		May Be to Fees	
24 3243	Country		32443	Country 30	8. This corporation has fiability for it			
	Name and Address	of Current Registe			10, Name and Address of New Re	istered Agent		
Masti	e DAVI	3		81 Name	70.00			
C & Front St					Iress (P.O. Box Number is Not Acceptab	······································		
1200	J, F (10)	31 –1	. /	83				
LAK	e City	FI 3	32025	84 City		FL 85 Zip	Code	
office or registe agent. Lam fan SIGNATURF	ered agent, or both, in illiar with, and accept se typed or present name of r	the State of Florida the obligations of,	a. Such change was au Section 607,0505, Flor applicable. (NOTE	uthorized by the corpora	poration submits this statement for the pution's board of directors. I hereby acception with the properties of the prope	t the appointment as	registered	
BUE	Dec.		☐ DELETE	1.1 TITLE	ABOTHOROGANAGES TO OTHE	☐ Change	RS IN 12 S	
NAME	mne#	Jaylord		12 NAME			25	
SPRET ALORESS	DB1742	LDX		1.3 STREET ADDRESS 1			120	
TILL 5	Recto Cos		☐ DELETE	21 TITLE		Change	Addition C	
NOM: NO	ettie PA	113 CT		2.2 NAME				
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CITY STORES				5.3 STREET ADDRESS 5.4 CITY-ST-ZIP			51	
1111			DELETE	6.1 TITLE		Change	Addition	
trame				6.2 NAME	00000216 -05/07/970109 ***165.00	ココムU 33021		
SIREFEADORETT				6 3 STREET ADDRESS 6 4 City-St-Zip	***165.00	rw who		
Thr Stylling 14. Lab tyrreby cer	lify that the informatio	n supplied with this	filing does not qualify	for the exemption state	d in Section 119.07(3)(i), Florida Statutes t my signature shall have the same legal	. I further certify that	the	
tian lan officer i	or director all the corp	oral on or the recei	ver or trustee empowe lachment with an addr	red to execute this repo	rt as required by Chapter 607, Florida St	atutes, and that my r	name	