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

PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

May 09 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P93000068321 (7)

CIRASC 2080 G WELLIN 11. Pursuant to It office or regis agent. I am fe sign 12. TITLE STATURE STREET ADDRESS CITY-ST-ZIP TITLE	Country 25 9. Name and Address of Curr OLE, PETER J 3RAY MARE NGTON FL 33414 The provisions of Sections 607.0 sterod agent, or both, in the Stellarnillar with, and accept the ob-	2502 and 607.1508, Fic ate of Florida Such ch oligations of, Section 60	nt lorida Statut nange was a 07.0505, Fig.	83 84 es, the above- authorized by the	City	4. FEI Number 65-044521 5. Certificate of Sta 6. Election Campal Trust Fund Conti 8. This corporation Florida Statutes 10. Name and Add ress (P.O. Box Number poration submits this station's board of directors	atus Desired gn Financing ribution has liability for L ress of New Re	Yes Distered A	\$8.75 / Fee Re \$5.00 Added tax under s No Agent	May Be to Fees . 199.032,
Suite, Apt. #, e City & State 2ip Zip CiRASC 2080 G WELLIN 11. Pursuant to the office or regis agent. Lam fe SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Country 25 9. Name and Address of Curr OLE, PETER J 3RAY MARE NGTON FL 33414 The provisions of Sections 607.0 stered agent, or both, in the Stellarnillar with, and accept the ob-	Suite, Apt. 27 City & Stat 28 Zip 29 rent Registered Agen 2502 and 607.1508, Ficate of Florida Such challigations of, Section 60	nt lorida Statut nange was a 07.0505, Flo	82 83 84 es, the above-rauthorized by the orida Statutes.	Street Addr	Certificate of Sta Election Campal Trust Fund Contr This corporation Florida Statutes Name and Add ress (P.O. Box Number	atus Desired gn Financing ribution has liability for L ress of New Re	intangible Yes p glatered /	\$8.75 Fee Re \$5.00 Added tax under s No Agent	Additional equired May Be to Fees . 199.032,
City & State 23 Zip 24 CIRASC 2080 G WELLIN 11. Pursuant to the office or regis agent. Lam fallows SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	9. Name and Address of Curr OLE, PETER J 3RAY MARE NGTON FL 33414 The provisions of Sections 607.0 stered agent, or both, in the Ste amiliar with, and accept the ob-	City & Stat 28 Zip 29 rent Registered Agen 2502 and 607.1508, Ficate of Florida Such chaligations of, Section 60	nt lorida Statut nange was a 07.0505, Flo	82 83 84 es, the above-rauthorized by the orida Statutes.	Street Addr	Trust Fund Control 8. This corporation Florida Statutes 10. Name and Add ress (P.O. Box Number	Ibution has liability for E ress of New Re is Not Acceptab	intangible Yes D gistered i	\$5.00 Added tax under s No Agent	May Be to Fees . 199.032,
Zip Zip Zip ZiRASC Z080 G WELLIN 11. Pursuant to it office or regis agent. Lam fit SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	9. Name and Address of Curr OLE, PETER J 3RAY MARE NGTON FL 33414 The provisions of Sections 607.0 stered agent, or both, in the Ste amiliar with, and accept the ob-	Ztp 29 rent Registered Agen 2502 and 607.1508, Ficate of Florida Such chaligations of, Section 60	orida Statut nange was a 07.0505, Flo	82 83 84 es, the above-rauthorized by the orida Statutes.	Street Addr	8. This corporation Florida Statutes 10. Name and Add ress (P.O. Box Number)	has liability for E Tress of New Re	intangible Yes D gistered i	lax under s No Agent 85 Zip	. 199.032,
CIRASC 2080 G WELLIN 11. Pursuant to the office or regis agent. I am fall sign. SIGNATURE SIGNATURE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Name and Address of Curr OLE, PETER J 3RAY MARE NGTON FL 33414 The provisions of Sections 607.0 sterod agent, or both, in the Standillar with, and accept the obstance, lyud or pinted name of registered	2502 and 607.1508, Fic ate of Florida Such ch oligations of, Section 60	orida Statut nange was a 07.0505, Flo	82 83 84 es, the above- authorized by the statutes.	Street Addr	ress (P.O. Box Number	is Not Acceptab	FL	85 Zip	
2080 G WELLIN 11. Pursuant to the office or regis agent. I am false in the sign of the si	GRAY MARE NGTON FL 33414 The provisions of Sections 607.0 stered agent, or both, in the Stantillar with, and accept the ob-			83 84 es, the above- authorized by the	Street Addr			FL	. []	
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	nature, typical or printed namic of registered			es, the above-rauthorized by the orida Statutes.		poration submits this station's board of directors	atement for the p	FL ourpose of ot the app	. []	
SIGNATURE 12. TITLE NAME STHEET ADDRESS CITY-ST-ZIP TITLE	nature, typed or printed name of registered				named corp he corporat	poration submits this sta tion's board of directors	atement for the p	ourpose of ot the app	changing it ointment as	s registered
STHEET ADDRESS 2 CITY-ST-ZIP V	r	AND DIRECTORS	DELETE	£ Registered Agent 13. 1.1 TiTLE	signature requir	red when reinstating) ADDITIONS/CHAI	NGES TO OFFIC	DATE ERS AND	DIRECTOR	IS IN 12
TITLE	CIRASOLE, PETER J 2080 GRAY MARE WELLINGTON FL 33414			1.2 NAME 1.3 STREET AC						
NAME.			DELETE	1.4 CITY · ST 2.1 TIFLE 2.2 NAME	ZIF				Change	Additio
STREET ADDRESS CITY - \$1 - 21P				2.3 STREET AD 2.4 City-St-						
TITLE NAME			DELETE	3.1 TITLE 3.2 NAME 3.3 STREET AL	DOMESS				Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE			DELETE	3.4. CITY - ST -					Change	Additio
NAME STREET ADDRESS			, 3216	4.2 NAME 4.3 STREET AL					The second secon	
CITY-ST-ZIF TITLE NAME STREET ADDRESS			DELETE	5.1 TITLE 5.2 NAME 5.3 STREET AL					☐ Change	Additio
CITY - ST - ZIP TITLE NAME		L.	DELETE	5 4 CITY-ST- 6 1 TITLE 6.2 NAME	ZIP			·	Change	Additio

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or on an attachment with an address.