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

PROFIT CORPORATION ANNUAL REPORT

1997



LLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000075835 (7)

Principal Place of Business 4250 CENTRAL AVE. ST. PETERSBURG FL 33711 ST. PETERSBURG FL 33711-1140			11-1140		
				3. Date Incorporated or Qualified 11/02/1993	3a. Date of Last Report 02/20/1996
2. Principal P	lace of Business	2a. Mailing Address		4. FET Number	Applied For
21		26		65-0446993	Not Applicable
Suite, Apt. #, etc.		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zψ	Country	8. This corporation has liability for i	
24	9. Name and Address of Current	29 Registered Agent	[30]	Florida Statutes 10. Name and Address of New Reg	Yes No
669	r, Jan J 1st ave. North Petersburg fl		82 Street Addi 83 84 City	ress (P.O. Box Number is Not Acceptab	
office or r agent. I a SIGNATURE	egistered agent, or both, in the State or familiar with, and accept the obligation of the state of rejetered agentications. Signature, typed or protect upon OTEICLES AND	tions of, Section 607.0505, F	authorized by the corporationida Statutes. 1. To political Agent signature requestrations.	coration submits this statement for the plant is board of directors, I hereby accepted when recently and when recently accepted when recently accepted when recently accepted when recently accepted accepted when recently accepted accepted when recently accepted accepted when recently accepted accepte	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SATTLER, DOUGLAS B 4250 CENTRAL AVE. ST. PETERSBURG FL 33711	[] DETEJE	1.1 THE 1.2 NAME 1.3 STREET ADDRESS 1.4 CHY: ST: ZIP		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		BELFTE	2.1 THE 2.2 NAME 2.3 STREET ADDRESS 2.4 GBY-SE-ZIP		Change Addition
TITLE NAME STREET ADDRESS		∏ DELETE	3.1 THE 3.2 NAME 3.3 STREET ADDRESS		Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS		DELETE	3.4 CHY-S1-ZIP 4.1 THE 4.2 NAME 4.3 STREET ADDRESS		Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS		DETETE	4.4.0(1) - ST - 767 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	:	Change Addit on
CITY-ST-ZIP TITLE NAME STREET ADDRESS		[] DELETE	54 CHY - ST-ZIP 61 THE 62 NAME 63 STREET ADDRESS		Change Addition

14. I do hereby certify that the information supplied with this filing does not quality 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 logal effect 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

CICNIATUDE.

Dans la Saller

Alin 100 813-321-6220

FILED

Apr 15 1997 8:00am

Secretary of State