SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/1/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # P93000082836 (6)

ACCUPATE LACED MACCE INC

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incipal Place of	Business	Mailing Address			•
AD OLEAD LAVE	: CIDCI E	PO BOX 951869			
		LAKE MARY FL 32795-18	69	Date Incorporated or Qualified	
				3. Date Incorporated or Qualified 11/24/1993	07/20/1995
				4. FEI Number	Applied For
Principal Plac	e of Business	2a. Mailing Address		59-3238086	Not Applicable
		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional
Suite, Apt. #,	etc.	27			
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be Added to Fees
		28	T 0	Trust Fund Contribution 8. This corporation has liability for	
Zip	Country	Zip	Country	Florida Statutes	Yes 🛂 No
	9. Name and Address of Curren	29 Agent	30	10. Name and Address of New Re	egistered Agent
		t riegisterae rigotti	81 Name		
DAVI	S, DONNA J		82 Street Add	tress (P.O. Box Number is Not Accepta	ble>
	CLEAR LAKE CIRCLE		L. \		
SAN	FORD FL 32773		83		
			84 City		FL 85 Zip Code
•				poration submits this statement for the ption's board of directors. I hereby accept	and abanding its registered
agent I am	tamiliar with, and accept the oong	ations of George		poration submits this statement for the patients of the patients of directors. I hereby acception's board of directors.	DALE
IGNATURE S	ignature. Typed or printed name of registered ag-	The Bottle of the Control of the Con	OTE Registered Agent's gnature requ	and when reinstating) ADDITIONS/CHANGES TO OFF	
s	OFFICERS AN	ID DIRECTORS	13.	ored when renstating) ADDITIONS/CHANGES TO OFF	
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SIGNATURE: RICHARD K. DAVIS 1AU 96 417-323-5598

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