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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000084792 (9)

Country

9. Name and Address of Current Registered Agent

25

DAVIS, HARVEY F **404 HAVENDALE BLVD**

AUBURNDALE FL 33823

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

22

23

24

IXTHUS, INC.		
Principal Place of Business	Mailing Address	
518 SOMERSET DRIVE AUBURNDALE FL 33823	518 SOMERSET DRIVE AUBURNDALE FL 33823-9527	
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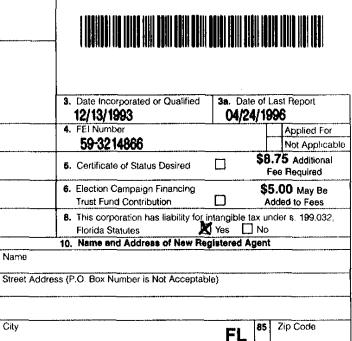
2a. Mailing Address

City & State

Zip

Suite, Apt #, etc

FILED Mar 06 1997 8:00am Secretary of State



11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am fam har with, and accept the obligations of, Section 607.0505, Florida Statutes.

Country

81 Name

82

83 64 City

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SIGNATURE	Signature typed or printed name of registered agent and tick if applicable IN	IOTE: Registered Agent signature	a reculred when reinstaling)	DATE	·····
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC		S IN 12
1-TLF	D DELETE	1.1 TITLE		Change	Addition
NAME.	DAVIS, HARVEY F	12 NAME			
STREET ACRORESS	518 SOMERSET	13 STREET ADDRESS			
CITY - ST - ZIP	AUBURNDALE FL 33823	1.4 CITY+ST-ZIP			
10.6	D DELETE	2.1 TITLE		Change	Addition
NAME	DAVIS, VERONICA D.	2.2 NAME	and the line on The.		
STREET ADDRESS	302 POLK CITY RD	2.3 STREET ADDRESS	12 melleus Ce	2204 17	
COTY - S1 - ZIP	AUBURNDALE FL	2. 4 CITY - \$T - ZIP	22 Hallcage De. BABSON PARKI R	,3312/	
TITLE	D DELETE	3.1 TITLE		☐ Change	Addition
NAME	DAVIS, DEBORAH J	3.2 NAME	1		
STREET ADDRESS	518 SOMERSET	3 3 STREET ADDRESS		_	
CHY-ST-ZIP	AUBURNDALE FL 33823	3.4. CITY- ST - ZIP			
TITLE	D DELETE	4.1 TITLE	. ~	Change	Addition
NAME	MARK A. DAVIS	4. 2 NAME	- 11-11-000 D	۷,	
STREET AFORESS	302 POLK CITY RD	4.3 STREET ADDRESS	22 MEUCKE	G 40	001
CITY: ST-ZIP	AUBURNDALE FL	4.4 CITY - ST - ZIP	22 HEUCRES PARK,	25	12/
1 ILE	D DELETE	5.1 TITLE		Change	Addition
NAME	WILLIAM D. SLONE	5 2 NAME			
STREET ACIDRESS	820 ARIEITA CIRCLE,N	5 3 STREET ADDRESS		4 4 8 4 4	
CITY - ST - ZIP	AUBURNDALE FL	5.4 CITY-ST-ZIP		33828	
10.E	☐ DELETE	6.1 TITLE		☐ Change	Addition
NAMt		6.2 NAME			
STREET ADDRESS		6.3 STREET ADORESS			
CHY-S1-7IP		6.4 CITY - ST - ZIP			

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 troptee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if thanged, or on an attachment with an address.

SIGNATURE: