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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 18 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000087352 (9)

NAME

STREET ADDRESS

		Mailing Address 18307 OAKDALE RD ODESSA FL 33556491	9						
US US	niv.vv	US US	•				T2		
						 Date Incorporated or Qualified 12/22/1993 	3a. Date 07/09	of Last Re / 1996	eport
2. Principal F	Place of Business	2a. Mailing Address	2a. Mailing Address 26			4. FEI Number 65-0496055			
Şulte, Apt.	#, etc.	Suite, Apt #, etc.	Suite, Apt #, etc.			Certificate of Status Desired		\$8.75	Additional
City & Stat	la la	City & State						Fee Re	`
23]	10	28				Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	
Zip	Country	Zip	Cou	intry	<u></u> -	8. This corporation has liability for i		under s.	
24	25	29				Florida Statutes Yes No 10. Name and Address of New Registered Agent			
704	9. Name and Address of Cu	urrent Hegistered Agent		81	Name	10. Name and Address of New Re-	gisterea Ag	ent	
	1, steven r 107 Oakdale RD								
ODESSA FL 33556				Li	Street Addi	ress (P.O. Bex Number is Not Acceptab	ie)		
				83					
				84	City		FL	35 Zip C	Code
11. Pursuant	to the provisions of Sections 607	7 0502 and 607 1508 Florida Sta	tutes the al	bove-	named corr	poration submits this statement for the p lion's board of directors. I hereby accep		anging its	togistered
SIGNATURE	Signature, typod or printed hame of registere	ed agent and title if applicable (f	NOTE: Rog-stored			ed when reinstating)	DATE	·	
12.	OFFICERS	S AND DIRECTORS DELETE	13. 1.1 10			ADDITIONS/CHANGES TO OFFIC		RECTORS Change	S IN 12 Addition
NAME	ZEH, STEVEN R.		1.1 RI 1.2 NA		i		L	Change	MODITION
STREET ADDRESS	18307 OAKDALE RD				DDRESS				
CITY-ST-ZIP	ODESSA FL			1.4 C(TY-ST-Z)P					
TITLE	VP	☐ DELETE	21 TII	TLE				Change	☐ Addition
NAME	ZEH, KAREN D.		2.2 NA						
STREET ADDRESS	18307 OAKDALE RD ODESSA FL				DDRESS				
CITY-ST-ZIP TITLE	OLLOOK FL	DELETE	2. 4 CI	11Y-\$1- 1LE	- ZIP			Change	Addition
NAME		_ precit	3.2 NA				_		
STREET ADDRESS	}				DDRESS				
CITY-ST-ZIP			3.4. CI	ITY-\$T-	- 21P				
TITLE		☐ DELETE	4.1 1/1	TLE	T			Change	Addition
NAME			4. 2 N/						
STREET ADDRESS					DORESS				
CITY+ST-ZIP		DELETE		1Y-S1-	ZIP			Change	Addition
TITLE NAME		LJ DECENE	5.1 YIT 5.2 NA		-			onange	☐ Modition
STREET ADDRESS			I.		DDRESS				
CITY+ST-ZIP			•	TY-ST.	ſ				
TITLE		DELETE	61.11		E-11			Change	Addition

6.2 NAME

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 uport is true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an officer or director of the corporation or the receipter or true ee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 to image, of the adaptive with an address.

STEVEN R ZEH