FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

DOCUMENT

P93000088585 (3)

1. Corporation Name

Principal Place of Business Maiing Address 2013 SHORELAND DRIVE AUBURNDALE FL 33823 Maiing Address 2013 SHORELAND DRIVE AUBURNDALE FL 33823						
				3. Date Incorporated or Qualified 3 11/10/1993	 a. Date of Last Report 03/27/1995 	
2. Principal Pla	ace of Business	28. Mailing Address 26		4. FE! Number 59-3221457	Applied For Not Applicable	
Suite, Apt	#, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
City & State)	Dity & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Ζφ 4]	Country 25 9. Name and Address of Cui	Ζφ 29	Country 30	8. This corporation has liability for intan Florida Statutes	ngible tax under s. 199.032, No	
OL TAIN			81 Name	IV, Harry and Addition of Not Hage	The state of the s	
GLENN, JACKY C 2013 SHORELAND DRIVE AUBURNDALE FL 33823			82 Street A	Address (P.O. Box Number is Not Acceptable)	<u></u>	
			63		# 5 * 30 * 24 * 50 * 6 * 10 * 4 * 10 * 10 * 10 * 10 * 10 * 10	
			84 Orty		FL 85 Zip Code	
12. 15 IF	Signal verification pentadinance of registered. OFFICERS D GLENN, JACKY C 2013 SHORELAND DRIVE AUBURNDALE FL 33823	AND DIRECTORS DELETE	2016 Projections of Asjoint's greature in 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST-ZIP 3.1 TITLE 3.2 NAME	ADDITIONS/CHANGES TO OFFICE	rivati PIS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition	
THEET ADDRESS ITY-ST ZIP ITUE AME		DELETE	3.3 STREET ADDRESS 3.4 C(1) - S1 - Z(P 4.1 TILLE 4.2 NAME		Change Addition	
THEFT ADDRESS PTY - ST _ZIP MILE IAME TREET ADDRESS		DELETE	4.3 STREET ADDRESS 4.4 CHY-SI-709 5.1 THE 5.2 NAME 5.3 STREET ADDRESS		Change Add tion	
ity-st_zip itle ame		DELETE	5.4 CHY-S1-ZIP 6.1 THEE 6.2 NAME 6.3 STREET ADDRESS		Change Addition	
certify that cath; that	t the information indicated on this :	annual report or supplemental ar proporation or the receiver or trus	6.3 STREET ADDRESS 6.4 CITY-ST-7IF mished and does not qual roual report is true and ac tee empowered to execut	lify for the exemption stated in Section 119.07(curate and that my signature shall have the san eithis report as required by Chapter 607, Florida C. GLENN	ne legal effect as if made unde a Statutes; and that my name	

SIGNATURE:

Schature and typed or printed Hame Of Signing Officer or Director