SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000003591

14. I 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 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.

FILED Jul 29, 1999 8:00 am Secretary of State

07-29-1999 90021 014 ***550.00

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44. Description of participants of participant	anging its registered	ation submits this statement for the purpose of C	amed comoration su	above-par	a Statutes the	ad 607 1508 Ele	inions of partiage 607 0502 a	44 Durayant to the provi
office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's poard of directors. I hereby accept the appointment as registered	ntment as registered	on's board of directors. I hereby accept the appo	e corporation's boa	zea by the	ide was author	Florida Such ch	ident or both in the State of	office or registered a
agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.				tatutes.	U505, Florida	ons of, section 60	with, and accept the obligation	agent. I am familiar i
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE		ired when reinstating) DATE	nt signature required when	istered Agent r	(NOTE: Re	nd title if applicable.	d or printed name of registered agent at	
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