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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P9400020704 (0)

	Lass installations in	C.		MARKA				
Principal Place of Business Mailing Address 2332 PINEHURST STREET 2332 PINEHURST STREET			-		T THE RESERVE THE THE STATE OF BUILDING WEEKS AND I	11 OMISM SERVE MB	116 d er it maite	BURN FARM
SARASOTA FL		SARASOTA FL 34231-6836						
					3. Date Incorporated or Qualified 03/14/1994		of Last Re 6/1996	eport
2. Principal P	2. Principal Place of Business 2a. Mailing Address				4. FEI Number		····	plied For
21	4	26 Cuito A at # ata			65-0471014			t Applicable
Suite, Apt.	井, EIG	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 A	
City & Stati	6	City & State	··········		Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	
Ζφ 24	Country 25	Zip	Country 30		8. This corporation has liability for		ax under s.	
	9. Name and Address of Curr		1301		10. Name and Address of New R			
FISH	ier, lesue w		81	Name				
2332 PINEHURST STREET				Street Add	ress (P.O. Box Number is Not Accepta	ble)		
SAR	ASOTA FL 34231		83					
							,	
			84	City		FL	85 Zip (Code
office or r agent Ta SIGNATURE	registered agent or both, in the Starm familiar with, and accept the ob-				poration submits this statement for the tion's board of directors. I hereby acce and when reinstating)	DATE	niment as	registered
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	CERS AND (PRECTOR	S IN 12
Title	P	DELETE	1.1 TITLE				Change	Addition
NAME	FISHER, LESLIE W		1.2 NAME					
STREET ADDRESS	2332 PINEHURST STREET SARASOTA FL 34231		1.3 STREET					
CITY-SI-ZIP TITLE	V	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE				Change	Addition
NAME	FISHER, KATHLEEN	•	2.2 NAME				•	
STREET ADDRESS	2332 PINEHURST STREET		2.3 STREET	ADDRESS				
CiTy - ST-ZIP	SARASOTA FL 34231	Lionita	2. 4 CITY - S	T-ZIP			T 6:	
TITLE		C DELETE	3.1 TITLE	1		· L	Change	Addition
NAME STREEL ADDRESS			3.2 NAME 3.3 STREET	ADDECC				
CHY-S1-ZIP			3.4. CITY-S					
THILE		☐ DELETE	4.1 TiTLE				Change	Addition
NAME			4. 2 NAME					
STREET ADERESS			43 STREET	ADDRESS	•			
CHY-ST-7IP		□ bruter	4.4 CITY-S	T-ZIP			77.05	THE REPORT
TITLE		☐ DELETE	5.1 TITLE			ι	Change	Addition
NAME STOLL LAGGRESS			5.2 NAME 5.3 STREET	ADDRESS				
STREET ADDRESS COTY ST-70P			5.3 STREET 5.4 CITY-S					
THE STATE		T DELETE	54 UIT - 5	1 . T.IL			Channe	Addition

14. I do hereby certify that the information supplied with this filling 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 a man 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 application is likely 13 if planned or one and stackment with an address.

6.3 STREET ADDRESS

6.2 NAME

SIGNATURE: LESLIE W. FISHER-PRESIDENT IN SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

NAME

STREET ADDRESS

91 941 924-897

FILED

Apr 28 1997 8:00am

Secretary of State