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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT

SIGNATURE:

P94000025159 (2)

EDGE COMPANIES, INC.

FILED May 07 1997 8:00am Secretary of State



Principal Place of Business		Mailing Address	Mailing Address				
316 FLEMING DRIVE GREENCOVE SP FL 32043 US		316 FLEMING DRIVE GREEN COVE SP FL 32043-9327 US					
				3. Date Incorporated or Qualified 04/01/1994	3a. Date of Last 05/09/1996	. '	
2. Principal Pr	ace of Business	2a. Mailing Address		***************************************	4. FEI Number		Applied For
l		26			59-3250038	1 →	Not Applicab
Suite, Apt	#, etc	Suite, Apt. #, etc.		***************************************	5. Certificate of Status Desired		Additional
<u></u>		27			Certificate of Status Desired	Fee	Required
City & Stafe	ì	City & State			6. Election Campaign Financing		0 May Be
l;		28			Trust Fund Contribution	·	d to Fees
- Ζιρ 1	Country	Zip	Country		8. This corporation has liability for it	ntangible tax under 1 Yes No	s. 199.032,
	25 9. Name and Address of Curre	29 ent Registered Agent	30		Florida Statutes 10. Name and Address of New Reg		
			81	Name			
	OSITO, J. MICHAEL						
	FLEMING DRIVE		82	Street Add	Iress (P.O. Box Number is Not Acceptab	le)	
	re 209 En cove springs fl 32043		83				,
GnE	EN COVE SPHINGS PL 32043	,	100	0''			- 0-1-
			84	City		FL 85 Zi	p Code
. Parsuant	to the provisions of Sections 607.05	502 and 607.1508, Florida Sta	atules, the above	-named cor	poration submits this statement for the pation's board of directors. I hereby accept		its register
of to sollto	egistered agent, or both, in the Stat m familiar with, and accept the obti	te of Florida. Such change w	as authorized by	the corpora	ition's board of directors. I hereby accep	it the appointment a	as registered
	m rai illas witti, ario accept i iti opii	igations of Section bor 5555	, i ionga otatutes				
GNATURE						DATE:	
	Signature tryphoche princed name of registered a	agent and title if applicable	NOTE: Registered Ago	nt signature requ	ired when reinstating)	DATE	
	Signature typice or protect marks of registered a OFFICERS A	agent and little if applicable (NOTE: Registered Age:	nt signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFFIC		ORS IN 12
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2. .f	OFFICERS A	ND DIRECTORS	13.	nt signature requ		ERS AND DIRECTO	
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