F CORI ANNU	NOW: FILING FEE AFTER MAY 1 IS \$225.00 ROFIT ORATION AL REPORT 996 ROFIT ORATION AL REPORT DIVISION OF CORPORATIONS				
DOCUN 1. Corporation NGE C	MENT # P94000	031629 (6)			
Principal Place 3033 RIVIERA SUITE 106 NAPLES FL 3	DRIVE	Mailing Address 3033 RIVIERA DRIVE SUITE 106 NAPLES FL 33940		3. Date Incorporated or Qualified 04/21/1994	3a. Date of Last Report 04/18/1995
2. Principal Pla 21	ce of Business	2a. Mailing Address 26		4. FEI Number 65-0487028	Applied For
Suite, Apt. #	, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	Not Applicable
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23] Zip 24]	Country	28 Zip 29	Country 30	Trust Fund Contribution 8. This corporation has liability for in Floride Statutes	tangible tax under s 199.032,
	9. Name and Address of Current		81 Name	Florida Statutes Yes 10. Name and Address of New Re	
#106 NAPLES 11. Pursuant to or registere familiar with SIGNATURE	, and accept the obligations of, decilor	1007.0505, FIDHUA Statutes.	83 84 City the above-named corpor by the corporation's boa	ress (P.O. Box Number is Not Acceptable ration submits this statement for the purp rd of directors. I hereby accept the appoi	FI 85 Zip Code
s 12.	gnalize Typic therippintee mane of registered agent as OFFICERS AND I		Registered Agent & gnature require 13.	d when reinstatings ADDITIONS/CHANGES TO OFFIC	DATE DERS AND DIRECTORS IN 12
THUE NAME STHEE! ADDRESS OFFY ST-7P	dp de Espinosa, Nicole G 3033 Riviera Drive, Suite 10 Naples Fl	[] DELETE 6	1. 1 TITLE 1 2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP		Change Addition Ct. F80
T TUF NAME STREET ADDRESS CITY - ST - 21P	S MICHALUP, VANESSA 3033 RIVIERA DRIVE, #106 NAPLES FL	DELETE	2 1 TITLE 2 2 NAME 2 3 STREET ADORESS 2 4 CITY - ST - ZIP		Change Addition 6
TILE NAME STREET ADDRESS CHY+ST-ZIP	T MICHALUP, GABRIEL 3033 RIVIERA DRIVE, #106 NAPLES FL	DELETE	3 1 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-2IP		Change Addition
THUE NAME STREET ADDRESS CITY, ST-ZIP		DELETE	4 1 TIPLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		Change Addition
TITLE NAME STAFET ADDRESS CITY - ST - ZIP		DELETE	5. 1 THLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - S1 - ZIP		Change Addition
THLF NAME STREET ADORESS OHY-ST ZIP		🗋 DELETE	6 1 TITLE 6 2 NAME 6 3 STREET ADDRESS 6 4 CITY - ST - ZIP		Change Addition
oath; that I a	am an officer or dicated on this annual am an officer or director of the corporat Block 12 or Block 13 if changed, or on i	in or the receiver or trustee e an attachment with an address	report is true and accura mpowered to execute this s.	or the exemption stated in Section 119.0 te and that my signature shall have the s s report as required by Chapter 607, Flor SPINDSA 2/19/96	ame legal effect as if made under ida Statutes; and that my name