SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

	f Business		1 1 1 1 1 1 1 1 1			
		Mailing Address		3 (80)(00) JIA (01)(6JAI(68(i) 06(i) 0	Alii 88))) dibbi tibii Baisi (am san san	
4302 W. MAIN ST. MIMS FL 32754		4302 W. MAIN ST. MIMS FL 32754		3. Date Incorporated or Qualified	3. Date Incorporated or Qualified 3a. Date of Last Report 05/27/1994 05/01/1995	
		2a. Mailing Address	·	4. FEI Number	Applied For	
2. Principal Plac	ce of Business			59-3243014	Not Applicable	
1		Suite, Apt #, etc		5. Certificate of Status Desired	\$8.75 Additional	
Suite, Apt #,	eic	27		5. Certinoare of diameter	- 1 Co Trodonos	
City & State		City & Stale		6. Election Campaign Financing	\$5.00 May Be Added to Fees	
13		28		Trust Fund Contribution		
Zip	Country	Zıp	Country	8. This corporation has liability fo	Yes No	
24	25	29	30	Florida Statutes 10. Name and Address of New F		
Name and Address of Current Registered Agent			81 Nar			
11. Pursuant to office of reg agent. I approved the summer of the summer	ILLEN CO			ned corporation submits this statement for the corporation's board of directors. I hereby acce	DATE	
12.	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12 Change Addition	
TITLE	D	DELETE	1.1 TITLE			
NAME	HUNT, RICHARD		1.2 NAME			
STREET ADDRESS	5171 ORANGE AVE.		1 3 STREET ADOR			
CITY-ST-ZIP	WINTER PARK FL 32792	DELETE	1.4 CHY+ST-ZIP 2.1 TITLE		Change Addition	
TITLE		☐ Defete	2 1 111LE 2 2 NAME			
NAME			2 3 STREET ADDR	3FC\$		
STREET ADDRESS			2 4 City - St - Zii			
CITY-ST-ZIP		DELETE	3 1 TITLE		Change Addition	
TITLE			3.2 NAME			
			3 3 STREET ADD	RESS		
NAME						
STREET ADDRESS			3.4 CITY-ST-ZI	P	Change	
STREET ADDRESS CITY-ST-ZIP		DELETE	4 1 THLE	r	Change Additio	
STREET ADDRESS CITY-ST-ZIP TITLE		DELETE			Change Additio	
STREET ADDRESS C(1Y-ST-ZIP TITLE NAME		DELETE	4 1 TITLE		Change Additio	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			4 1 TIFLE 4. 2 NAME 4.3 STREET ADD 4.4 CITY - ST - ZI	RESS		
STREET ADDRESS CHY-ST-ZIP TITLE NAME		DELETE DELETE	4 1 TIFLE 4. 2 NAME 4.3 STREET ADD	RESS	Change Additio	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes I further certify that the information indicated on trips annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if further certify that the information indicated on trips annual report to supplemental annual report is true and accurate and that my signature shall have the same legal effect as if further output first I am an off-cer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 15 of Block 15 o 64 CITY - ST - ZIP

5 4 CITY - \$1 - ZIP

6 3 STREET ADDRESS

61 TITLE

62 NAME

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

DELETE

Change Addition

0139625