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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jun 05 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

P94000041832 (4)

THE ANI	EKS GROUP, INC.							
Principal Plac	e of Business	Mailing Address						
101 E. PRINCETON STREET ORLANDO FL 32804		101 E. PRINCETON STREET ORLANDO FL 32804-5046						
						3. Date Incorporated or Qualified 3a. Date of Last Report 06/01/1994 08/05/1996		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number Applied For		
21		28	26			59-3247477 Not Applicable		
Suite, Apt	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired See Required \$8.75 Additional Fee Required		
City & Stat	в	City & State				6. Election Campaign Financing \$5.00 May Be	ĺ	
23		28				Trust Fund Contribution	Ì	
Zip Country		Zip Co		ountry		8. This corporation has liability for intangible tax under s. 199.032,		
24	25	29	30			Florida Statutes Yes No		
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Registered Agent	ĺ	
SKE	na, dianne			81	Namo			
101 E. PRINCETON STREET				82	Street Ac	dress (P.O. Box Number is Not Acceptable)		
ORL	ANDO FL 32804						Į	
				83			l	
				84	City	■■ 85 Zip Code	l	
₹						FL 1 i		
office or r agent. I a	egistered agent, or both, in the State im familiar with, and accept the oblig	e of Florida. Such change was ations of, Section 607.0505, I	authorize Florida Sta	d by tutes	the corpo	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered		
	Signature, typed or printed name of registered ag			d Age	ent signature re	required which roinstating) OATE	-	
12.		D DIRECTORS	13.	13. 1.1 TILLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	CR2E034 (9/96)	
TITLE	D DELETE					Change Addition	9	
NAME SKENA, DIANNE			1.2 N				滋	
STREET ADDRESS	101 E. PRINCETON STREET			.3 STREET ADDRESS			Щ	
CITY-ST-ZIP	ORLANDO FL 32804			1.4 C(TY - ST - Z(P 2.1 T(T)E			兴	
TITLE						Change Addition	ľ	
NAME			2.2 N			,	ĺ	
STREET ADDRESS			2.3 STREET ADDRESS		ADDRESS			
CITY-ST-ZIP	, <u>ii.</u>	OFFEE			ST-ZIP	D Observe D Addition		
TITLE	☐ DELETE			3.1 TITLE 3.2 NAME		☐ Change ☐ Addition }	ĺ	
NAME						'		
STREET ADDRESS					ADDRESS		ĺ	
CITY-ST-ZIP		DELETE			ST-ZIP	Change Addition	,	
TITLE	bette			4.1 TITLE		Change Addition		
NAME				4. 2 NAME				
STREET ADDRESS				1.3 STREET ADDRESS		_		
CITY-ST-ZIP		DELETE			1- Z(P	Change Addition		
TITLE			5.1 1			All La cliange La Addition		
NAME			5.2 NAME 5.3 STREET A			\(\lambda \) \(\lamb		
STREET ADDRESS						711 (01)/7]		
CITY-ST-ZIP	ZIP DELETE			5.4 CITY - S1 - ZIP 6 1 TITLE		☐ Change ☐ Addition	1	
TITLE		DECE				800002209373 -06/11/9701109041	l	
NAME			6.2 N		ADDRESS	-06/11/9701109041		
STREET ADDRESS			6.3 S	IKEEI	ADDRESS	***165.00		

14. I do 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.

SIGNATURE: