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 # P94000044854 (5)

Principal Place of Business 1104 PINE TREE OR LANTANA FL 33462	Mailing Address 1104 PINE TREE LANTANA FL 334							
US	US	******						
					3. Date Incorporated or Qualified 06/13/1994		e of Last F 1/1996	Report
2. Principal Place of Business	2a. Mailing Addre	ess	···	J 	4. FEI Number		A	pplied For
n	26				65-0499618	····		ot Applicable
Suite, Apt. #, etc	Suite, Apt. #,	etc.			5. Certificate of Status Desired			Additional equired
City & State	City & State				Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip Country 25	Zip 29	30	Country		8. This corporation has liability for		ax under	
9. Name and Address of Cu		1301	T		10. Name and Address of New R		.	
STAUFFER, HERBERT JR 1104 PINE TREE DR LANTANA FL 33462			82 Street Address (P.O. Box Number is Not Acceptable) 83					
			84	City		FL	85 Zip	Code
 Pursuant to the provisions of Sections 607 office or registered agent, or both, in the Sagent I am familiar with, and accept the c SIGNATURE 	.0502 and 607.1508, Floric tate of Florida. Such chan bligations of, Section 607.	la Statutes, t ge was autho 0505, Florida	he above orized by Statutes	e-named of the corp s.	corporation submits this statement for the oration's board of directors. I hereby acce	purpose of opt the appo	changing intment as	its registered registered
Sig salvier typed or printed name of registers		(NOTE: Rec		int signature (required when reinstating)	DATE		
	AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFI	CERS AND		
TITLE D	. □ DE	CEIE	1.1 TITLE			,	Change	Addition
NAME STAUFFER, HERBERT J JI	(- 1	1.2 NAME					
STREET ADDRESS 1104 PINE TREE DR		- 1	1.3 STREET	1				
CITY-ST-ZIP LANTANA FL	DE	1 575	1.4 C/TY - S 2.1 T/TLE	iT-ZIP			Change	Addition
TITLE	بالا تي						L. Orkange	L J Addition
NAME		1	2.2 NAME	*******				
STREET ADDRESS			23 STREET					
COTY - ST - ZVP	DE		2 4 CITY-:	51-219			Change	Addition
NAME			3.2 NAME	ļ		,		
STREET ADDRESS			3.3 STREET	ADDRESS				
Queek i Historia ad								
raty, et. 7ip		1		1				
	□ OE		3.4. CITY-!	1			Change	Addition
TITLE	□ OE		3.4. CITY-	1			Change	Addition
C-1Y - ST- ZIP TITLE NAME STREEL AODRESS	□ OE		3.4. CITY-! 4.1 TITLE	ST-ZIP			Change	Addition

6.4 CITY - ST- ZIP 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

5.1 TITLE

52 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

TILE

NAME

STREET ADDRESS

STREET ADDRESS

CITY - ST - 70°

DELETE

DELETE

Change

Addition

FILED

Apr 30 1997 8:00am

Secretary of State

0328750

Change Addition