

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.)

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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000049402 (8)

1. Corporation Name

PHYSICAL ADDICTIONS, INC.



Principal Place of Business

Mailing Address

1220 N. HIGHWAY A1A, #19
INDIAN LANTIC FL 32903

1220 N. HIGHWAY A1A, #19
INDIAN LANTIC FL 32903

3. Date Incorporated or Qualified
06/29/1994

3a. Date of Last Report
07/05/1995

2. Principal Place of Business

21 200 S. Miramar

Suite, Apt. #, etc.

22 City & State
Indian Lantic FL

23 Zip
32903

24 Country

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2a. Mailing Address

26 200 S. Miramar

Suite, Apt. #, etc.

27 City & State

28 Indian Lantic, FL

29 Zip

30 Country

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4. FEI Number

59-3253296

Applied For

Not Applicable

5. Certificate of Status Desired

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\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

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\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

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Yes

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No

9. Name and Address of Current Registered Agent

MARTIS, RICK
1220 N. HIGHWAY A1A, #19
INDIAN LANTIC FL 32903

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

200 S. Miramar

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SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

Date

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP

D MARTIS, RICK

1220 N. HIGHWAY A1A, #19

INDIAN LANTIC FL 32903

TITLE NAME STREET ADDRESS CITY - ST - ZIP

D HEINZE, FRANK

1220 N. HIGHWAY A1A, #19

INDIAN LANTIC FL 32903

TITLE NAME STREET ADDRESS CITY - ST - ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE NAME STREET ADDRESS CITY - ST - ZIP

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

200 S. Miramar

Indian Lantic FL 32903

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

200 S. Miramar

Indian Lantic, FL 32903

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

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 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/19/96

(407)
727-1107

Daytime Phone

CR2E034 (3/96)