## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

	1	996			OF CORPORATIONS	
	OCUN		# P940	00064902 (	7)	
1.	Corporation I		QUIN JR., P.A.		•	
Pri	ncinal Place o	of Business		Maling Address		A TOPHIOPERIN INNI NISH BESH BONI BUH PAND BAH BIFA INNI BIRA FIDI AND
	319 7TH ST V			319 7TH ST W		
	PALMETTO FL	•		PALMETTO FL 342	21	
						3. Date Incorporated or Qualified 3a. Date of Last Report 09/02/1994 05/01/1995
2.	Principal Plac	ce of Busine	ess	2a. Mailing Address		4. FEI Number Applied For
21				26		65-0522085 Not Applicable
Suite, Apt #, etc				Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional Fee Required
22	City & State			City & State		6. Election Campaign Financing \$5.00 May Be
23	0.1, 0.0.0.0			28		Trust Fund Contribution Added to Fees
	Zip		Country	Zip	Count y	8. This corporation has liability for intangible tax under s. 199.032,
24			25	29	30	Florida Statutes 🔀 Yes 🗌 No
		9. Name		rrent Registered Agent	81 Name	10, Name and Address of New Registered Agent
		WALTER				
		RD ST NW			8:2 Street	et Address (P.O. Box Number is Not Acceptable)
		TON FL 3			83	
					<b>84</b> City	85 Zip Code
						FL   T
11	. Pursuant to	the provisi	ons of Sections 607.0	0502 and 607.1508, Florida Sta Florida, Such change was authi	tutes, the above named or	corporation submits this statement for the purpose of changing its registered offici- is board of directors. Thoreby accept the appointment as registered agent. Fam
	familiar with	n, and acce	pt the obligations of, S	Section 607.0505, Florida State	tes.	, , , , , , , , , , , , , , , , , , , ,
SIC	GNATURF _	Santanara transc	or prededicable of regionse. I	anner for all the interess or ann	the Bayelores Aurent signature	remainis Who doct this DATE
12		ng o yn than		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TiTu	l F	D	UARAEN	DELETE	1 1 TiTk:	Change Addition
NA!	ME		N, <del>WALTER</del> -A JR		1.2 NAV	
STR	REET ADDRESS		3RD ST NW		1.3 STREET ADDRESS	8
	Y-ST-ZIP	DIVAUE	NTON FL 34209	☐ DECETE	14 C/1Y ST-Z/P	Change Addition
TITE	1				2 1 TiTL:	C Guarde C variation
	REET ADDRESS				2.3 STRE-T ADDRESS	s
	Y-SF-ZIP				24 C:TY ST-ZiP	
TIT				DELETE	3 1 1000	Change Addit on
NA	ME				3.2 NAM::	
STP	REET ADDRESS				33 SIR ET ADDRESS	88
<b></b>	Y - S <sup>y</sup> - ZIP			F3.64.64	3.4 CiTy   S* - 7 if	
1151	1			E) DEFENE	4.1100	Change Addition
NA!	ME REET ADDRESS				4.2 NAMI. 4.3 STRLET ADDRESS	s l
l	Y+ST-ZIP				4.5 STM : MEDMESS	2
TIT	- +			DELF1E	5 1 1iTte	Change Addition
NAF					5.2 NAM()	
STE	REET ADDRESS				5.3 STRIET ADDRESS	88
	Y - S1 - ZIP				54 CHTY ST ZIP	
7171				☐ DELETE	6 1 TIT. :	Change Addition
NAI					6.2 NAW."	
l	REET ADDRESS				6 3 STREET ADDRESS	8
L CIT	Y-ST-ZIP				6.4 CITY ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and dies 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 much an 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 trusted empowers it 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 articles.

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dayne Product

CR2E034 (12/95)