


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

FILED

May 06 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # <i>pa408807687</i>			
1. Corporation Name Kill Zone, Inc.			
Principal Place of Business 2432 Captian Hook Drive Jacksonville, FL 32224		Mailing Address 2432 Captian Hook Drive Jacksonville, FL 32224	
2. Principal Place of Business		3. Date Incorporated or Qualified 10/17/1994	
21. State, Apt. #, etc.		3a. Date of Last Report 1996	
22. City & State		4. FEI Number 59-3281390	
23. Zip		Applied For <input type="checkbox"/> Not Applicable	
24. Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
25. Country		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
26. Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
27. Country		9. Name and Address of Current Registered Agent Buschman, Albert E Jr 2215 South Third Street Suite 101 Jacksonville Beach, FL 32250	
28. Country		10. Name and Address of New Registered Agent	
29. Country		81. Name	
30. Country		82. Street Address (P.O. Box Number is Not Acceptable)	
31. Country		83.	
32. Country		84. City	
33. Country		85. Zip Code FL	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			
SIGNATURE _____ (NOTE: Registered Agent's signature required when reinstating) _____ DATE _____			
12. OFFICERS AND DIRECTORS			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
11. TITLE <input type="checkbox"/> DELETE			
12. NAME Beckerleg, William H III			
13. STREET ADDRESS 2432 Captian Hook Drive			
14. CITY-ST-ZIP Jacksonville, FL 32224			
21. TITLE <input type="checkbox"/> DELETE			
22. NAME			
23. STREET ADDRESS			
24. CITY-ST-ZIP			
31. TITLE <input type="checkbox"/> DELETE			
32. NAME			
33. STREET ADDRESS			
34. CITY-ST-ZIP			
41. TITLE <input type="checkbox"/> DELETE			
42. NAME			
43. STREET ADDRESS			
44. CITY-ST-ZIP			
51. TITLE <input type="checkbox"/> DELETE			
52. NAME			
53. STREET ADDRESS			
54. CITY-ST-ZIP			
61. TITLE <input type="checkbox"/> DELETE			
62. NAME			
63. STREET ADDRESS			
64. 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 13 if changed, or on an attachment with an address.			
SIGNATURE: <i>Wm H Beckerleg III</i> 4/28/97			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

CR2E034 (9/96)