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PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Apr 24 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P94000076015 (4)

Principal Place 20705 US 301		Mailing Address 20705 US 301			
DADE CITY FL US	. 33525	DADE CITY FL 33523-60 US	R65		
				 Date Incorporated or Qualified 10/13/1994 	3a. Date of Last Report 05/30/1996
. Principal Pl	lace of Business	2a. Mailing Address	· · · · · · · · · · · · · · · · · · ·	4. FEI Number	Applied For
1		26		59-3277422	Not Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	0	City & State		6. Election Campaign Financing	\$5.00 May Be
3		28		Trust Fund Contribution	Added to Fees
Zip T	Country	Zip	Country	6. This corporation has liability fo	r intangible tax under s. 199.032, Yes No
<u> </u>	[25] 9. Name and Address of Curre	29 29 Annt	30	Florida Statutes 10. Name and Address of New R	
FFA	······································	ant ridgistational Agent	81 Name	ty. Harry and Routes of How in	togratures Agent
	ister, edward w Jr. 3 Partridge Boulevard				
	STAL SPRINGS FL 33524		82 Street Add	dress (P.O. Box Number is Not Accepta	able)
UNI	OTAL OF MINOS FL SOURT		83		
					1.27
			84 City		FL 85 Zip Code
1. Pursuant	to the provisions of Sections 607.05	502 and 607.1508, Florida Stat	utes, the above-named cor	poration submits this statement for the	
office or re	egistered agent, or both, in the Stat	te of Florida. Such change was	s authorized by the corpora	rporation submits this statement for the ation's board of directors. I hereby acc	ept the appointment as registered
	m rammar with, and accept the con-	ganoris or, oscilori ooz.coo, i	ionpa statutes.		
SIGNATURE .	Signature, lyped or printed name of registered as				
		igent and title it applicable. (N	OTE: Registered Agent signature requ	uired when reinstating)	DATE
		igent and tille if applicable. (N ND DIRECTORS	OTE: Registered Agent signature requested. 13.	uired when reinstating) ADDITIONS/CHANGES TO OFF	
2.	OFFICERS AN				ICERS AND DIRECTORS IN 12
Z. TLF	OFFICERS AN	ND DIRECTORS	13.		ICERS AND DIRECTORS IN 12
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