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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 12 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000076063 (4)

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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 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, 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, 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, or both, in the State of Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 10. Time 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. Change Additional State Additional					83						
11. Previous to the processors of Sections 607 9502 and 607 1508, Floride Statutes. The above named corporation submits this statement for the purcose of changing its register office or registered again. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. DELETE 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 16. The Control of the process of the control of the con					84	City		· · · · · · · · · · · · · · · · · · ·	E 1	85 Zip (Code
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SIGNATURE Sign	office or re	egistered agont, or both, in the State	of Florida. Such change war	s authorize	d by	the corporat	tion's b	oard of directors. I hereby accep	of the app	pointment as	registered
12		m tamiliar with, and accept the oblig	ations of, Section 607.0505, I	Fiorida Sta	lutes.	•					}
DELETE TITLE Change Addit	SIGNATURE	Signature, typed or principlicance of registered ag	ent and title if applicable (N	OTE: Fleg stere	d Ager	nt signature requir	red when	reinstating)	DATE		
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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 am an officer or directly of y goorporation or the receiver or to stee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name	14. do heret	by certify that the information supplied in Indicated on this language reports of	ed with this filing does not qui supplemental annual report is	alify for the s true and	exer accu	mption stated	d in Se t my sid	ction 119.07(3)(i), Florida Statute gnature shall have the same lens	s. I furthe	ir certify that is if made un	the der oath: that