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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 18 1997 8:00am

Secretary of State

815 645-1932

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000079096 (1)

PEGASUS INTERNATIONAL, INC.

Principal Place of Business Mailing Address						- 1 100010004 638 39131 01041 00314 09351 00411		DEAL BOILD FOR	in dilli indi
941 BUNKER VIEW DR. APOLLO BEACH FL 33572 US 941 BUNKER VIEW DR. APOLLO BEACH FL 33572- US									
					3. Date Incorporated or Qualified 10/26/1994 3a. Date of Last Report 02/23/1996			eport	
2. Principal F	Place of Business	2a. Mailing Address	Mailing Address			4. FEI Number Applied For			oplied For
21		26				59-3281380			ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	<u> </u>			5. Certificate of Status Desired			Additional equired
City & Sta	le	City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 Added 1	May Be to Fees
Zip	Country	Zip	Cou	intry		8. This corporation has liability for in	ntangible t		
24	25 29 30		30		Florida Statutes Yes No				
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Reg	lstered A	gent	
RO	BERTS, HARRY E.			81	Name				
941 BUNKER VIEW DR.				82 Street Address (P.O. Box Number is Not			le)		
APOLLO BEACH FL 33572				Street Address (F.O. Box Number is Not Acceptable)					
				83		-			
ļ				84	City			85 Zip	Code
					,		FL		
I office or	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the oblig	e of Florida. Such change was	s authorize	d bv	the corporatio	oration submits this statement for the pon's board of directors. I hereby accep	urpose of t the appo	changing it intment as	is registered registered
SIGNATURE	Signature, typed or printed name of registered ag		OTE D		nt signature required		DATE		
12.		ND DIRECTORS	13.	a Agen	it signature requiret	ADDITIONS/CHANGES TO OFFIC		DIBECTOR	S IN 12
TITLE	DP OF TOP A STATE OF THE STATE	DELETE	1,1 TI	TLE	T	TIEBLITOTOLOGICA TO CALLED		Change	Addition
NAME	ROBERTS, HARRY E.	_	1.2 N/	AME					
STREET ADDRESS	A44 DUBITED MENT DD				ADDRESS				
CITY-ST-ZIP	APOLLO BEACH FL			TY-ST					
TITLE	The state of the s			2.1 TITLE				Change	Addition
NAME	ROBERTS, JEFFREY H	_	2.2 Nz	AME					
STREET ADDRESS	ALL BURNISCO MENT DORNE				ADDRESS				ļ
CITY-ST-ZIP	APOLLO BEACH FL		2 4 0	:ITY-S1	T - ZIP				
TITLE		DELETE	3 1 Ti					Change	☐ Addition
NAME	•		3.2 N	AME					
STREET ADDRESS			3.3 \$1	TREET A	address				
CITY-ST-ZIP			3 4 . C	HTY-ST	r-zip				
TITLE		DELETE	4 i Ti	TLE				Change	Addition
NAME			4.2 N	IAME					
STHEET ADDRESS			4 3 S	TREET A	ADDRESS				
CITY-ST-ZIP		<u></u>	4.4 C	ITY-ST	- ZIP				
TITLE	1	☐ DELETE	5.1 TI	TLE				Change	☐ Addition
NAME			5.2 N	AME					
STREET ADDRESS			5.3 S	TREET A	ADDRESS				
CITY-ST-ZIP			5.4 C	ITY-ST	- ZIP				
TITLE		DELETE	6.1 TI	TLE				Change	☐ Addition
NAME			6.2 N	AME					1
STREET ADDRESS			6.3 S	TREET A	ADDRESS				
CITY-ST-ZIP			6.4 C	ITY-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/3 if changed, or on an attachment with an address.