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

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

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DOCUMENT #	P940000809	17	(5)

USIA	
Mailing Address	
1112 RIDGEWOOD AVE. HOLLY HILL FL 32117	
	1112 RIDGEWOOD AVE

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						3. Date Incorporated or Qualified	3a. Date		
2. Principal P	lace of Business					11/03/1994		04/28/	/1995
21	isoc or positiess	2a. Mailing Address				4. FEI Number			Applied For
Suite, Apt.	#. etc	26				59-3288737			Not Applicable
22		Suite, Apt. #, etc.				5. Certificate of Status Desired			5 Additional Required
City & State	9	City & State				6. Election Campaign Financing			00 May Be
23		28				Trust Fund Contribution			led to Fees
Z ip	Country	Zip	Count	lry		8. This corporation has liability for i	ntangible ta		
[24]	25	29	30		n/	Florida Statutes	□ No		
	9. Name and Address of Current	Hegistered Agent		···		10. Name and Address of New R	egistered /	gent	
			8	11	Name				
	I, JOHN		8	2	Street Addres	ss (P.O. Box Number is Not Acceptabl	a)		
	RIDGEWOOD AVE.					to the second of the videoptable	c)		
HOLL	Y HILL FL 32117		8	3					
			8	4-	Ch.				
			1 -	1	City		FI		Zip Code
11. Pursuant t	to the provisions of Sections 607.0502 and agent, or both, in the State of Florida	and 607.1508, Florida Statutes	the above	-na	imed corporati	on submits this statement for the num	nose of char	Ogina ite	registered office
familiar wil	ed agent, or both, in the State of Florida th, and accept the obligations of, Section	n. Such change was authorized n 607.0505, Florida Statutes	I by the cor	rpor	ration's board	of directors. I hereby accept the appo	intment as i	ogistere	d agent. I am
I SIGNATURE									İ
46	Signature, typed or printed name of registered agent a		Registered Ag	jent s	signature required w	nen reinstating)	DATE		·
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFI	CERS AND	DIRECT	ORS IN 12
TITLE	D	DELETE	1. 1 TITLE	E				Change	
NAME	OLIVA, JOHN		1.2 NAME	_				-	
STREET ADDRESS	1112 RIDGEWOOD AVE.		13 STREE	EFAE	DORESS				
CITY-ST-ZIP	HOLLY HILL FL 32117		1.4 CITY-	ST	ZIP				
TITLE		DELETE	2 1 TITLE					Change	Addition
NAME			2.2 NAME				<u> </u>	unungs	L_ TAGGET
STREET ADDRESS			2.3 STREE	ET AD	DDRESS				
CITY-ST-ZIP			2.4 CHTY-						į
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CITY-ST-ZIP			3.4 CITY-		i i				
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NAME			4 2 NAME				لسا	Charige	Addition
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CITY-ST-ZIP									ĺ
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STREET ADDRESS			ľ	r are	IDDICEO .				}
CITY-ST-ZIP			5 3 STREET						ļ
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NAME		L Decen	6.1 TITLE					Change	☐ Addition
STREET ADDRESS			6.2 NAME						:
CITY-ST-ZIP			63 STREET						
	contif. that the last	···	6.4 CHY- S	<u> 51-2</u>	gp.				

LI do hereby certify that the information supplied with this filing is voluntarily furnished and does 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 true and accurate and that my signature shall have the same legal effect as if made undulappears in Block 12 or Block 13 if changed, or on an attachment with an address.

SI	G	N	47	rı.	IR	F

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

AUNO LHOP

4/29/96

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