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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400085683 (8)

TEOPLES, INC.

CITY-ST-ZIP

FILED May 16 1997 8:00am Secretary of State

Principal Place of Business 1111 SO. FEDERAL HIGHWAY STE. 226 STUART FL 34994 2. Principal Place of Business 21		Mailing Address 1111 SO. FEDERAL HIGHWAY STE. 226 STUART FL 34994-3834 2a. Mailing Address 26				3. Date Incorporated or Qualified 11/21/1994			
Sulte, Apt. #, 6 22 City & State	MC.	Suite, Apt. #, otc. 27 City & State			WATER TO THE PARTY OF THE PARTY	5. Certificate of Status Desired \$8.75 Additional Fee Required 6. Election Campaign Financing \$5.00 May Be			
Zip Country 24 25		28				Trust Fund Contribution			
(Name and Address of Currer	nt Registered Agent		4.0.00		10. Name and Address of New Re	gistered	Agent	
MATHERS, MARY M 1111 SO. FEDERAL HIGHWAY STE. 228 STUART FL 34994			8.	2	Name Street Addre	ss (P.O. Box Number is Not Acceptab	le)		
		8	4	City	FL 85 Zip Code			Code	
12. TITLE D NAME N STREET ADDRESS 1	IATHERS, MARY M 111 SO. FEDERAL HIGHWAY	D DIRECTORS	13. 1.1 HILE 12 NAME	E	nt signature requires	d when reinstating) ADDITTIONS/CHANGES TO OFFICE CONTROL ADDITTIONS/CHANGES TO OFFICE ADDITIONS/CHANGES TO OFFICE ADDITI	DATE ERS AND	DIRECTOR Change	
- UNI UN EN	TUART FL 34994	DELETE	1 ₄ 4 City 2.1 Hill		-ZIP			☐ Change	Addition
NAME STREET ADDRESS	ATHER, MARY M 11 SO PEDENAL TURAT, F1 349	Highway	1	ET #	Acidress				
TITLE NAME STREET ADDRESS	<u> </u>	DELETE	2 4 CITY 3 1 TITLE 3 2 NAM 3 3 STRE	 E IF	ADDRESS			Change	Addition
CITY-ST-ZIP TITLE NAME		☐ DELETE	3,4, C(1Y 4.11)TLE 4, 2 NAM	AE 	1 - ZiP ADDRESS			Change	Addition
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		[] DECETE	5,4 CITY 6,1 TITLE 6,2 NAM	· S1 E	ADDRESS 1 - ZIP ADDRESS			Change	Additio

14. I do hereby certify that the information symplied 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 is frue and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation of the receiver of the receiver