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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P94000090718 (5)

		Mailing Address P.O. BOX 190069 MOBILE FL 36619-0069				
		U\$		3. Date Incorporated or Qualified	7 1	
				12/15/1994	05/01/1996	
k	face of Husiness	2a. Mailing Address		4. FEI Number	Applied For	
21 Sυ te, Αρτ	w alo	Suite, Apt. #, etc.		65-0544574	Not Applicable	
22	#, tas	Saite, Apr. #. 6tc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat	le	City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	☐ Added to Fees	
Zio	Country	Zip	Country	8. This corporation has liability fo		
24	25	29	30		Yes No	
<u>-</u>	9. Name and Address of Cu	rrent Registered Agent	81 Name	10. Name and Address of New R	egistered Agent	
	NS, MURRY J					
4990 MANATEE AVE W, 201 BRADENTON FL 34209			82 Street Add	dress (P.O. Box Number is Not Accepte	able)	
) Drv	ADEMION FL 34208		83			
			84 City	84 City FL 85 Zip Code		
office or i agent. La SiGNATURE	registered agent, or both, in the S im familiar with, and accept the c		authorized by the corpora orida Statutes. E. Registered Agent's gnature requ	poration submits this statement for the ation's board of directors. I hereby accurate when reinstating)	ept the appointment as registered	
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12	
1111.6	P	DELETE	1.1 TITLE		Change Addition	
NAMI	EVANS, MURRY J		1.2 NAME			
STHEEL ACIDRESIS	4900 MANATEE AVE STE	201	1.3 STREET ADDRESS		}	
CHY-ST-7#	BRADENTON FL		1.4 CITY-ST-ZIP			
TITLE		☐ DELETE	2 1 TITLE		Change	
NAME CALCEL ALOGICO			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS 2.4 CITY-ST-ZIP			
CITY ST-ZIF 1911		DELETE	3.1 TITLE		☐ Change ☐ Addition	
HAME			3 2 NAME		-	
SPREEL AGORESS	1		3.3 STREET ADDRESS			
CdY+\$1-7#			3.4 CITY-ST-ZIP			
Title	, , , , , , , , , , , , , , , , , , , ,	DELETE	4.1 TITLE		Change Addition	
NAMÉ			4. 2 NAME			
STREET APORESS			4.3 STREET ADDRESS		Í	
CHY-81, 29		Top, etc.	4.4 CITY - ST - ZIP		Constant Constant	
TILL		☐ DELETE	5.1 TITLE		Change Add tion	
NAME			52 NAME		}	
STREET ADDRESS			5 3 STREET ADDRESS			
City: St-70°		DELETE	5.4 CITY-ST-ZIP		☐ Change ☐ Addition	
101 6		ביין הנינונ	6.1 TITLE		Change C Addition	
NAMI:	I .		6.2 NAME		J	

6.3 STREET ADDRESS 64 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS.

O1Y-51-7F

James W. Hartman, III VP-Finance

FILED

Apr 10 1997 8:00am

Secretary of State

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 13 if changed or on anytitachment with an address.