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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Apr 16 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000090826 (6)

		Mailing Address Mailing Address 3001 EXECUTIVE DRIVE SUITE 190 CLEARWATER FL 34622-				
					 Date Incorporated or Qualified 12/14/1994 	3a. Date of Last Report 06/10/1996
		2a. Mailing Address			4. FEI Number 59-3285265	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
City & State		27				Fee Required
23		28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zψ	Country		8. This corporation has liability for	intangible tax under s. 199.032,
24	25	29	30			Yes No
	g, Name and Address of Curre	ent Registered Agent	81	Name	10. Name and Address of New Re	gistereo Agent
SMITH, GERALDINE A 15219 GULF BLVD						The state of the second st
	DEIRA BEACH FL 33708		82	Street Add	ress (P.O. Box Number is Not Acceptat	ole)
471/W			83			
			84	City		85 Zip Code
				•		FL
office or agent. 1 a	am familiar with, and accept the obli	igations of, Section 607.0505, t	Florida Statutes	i.	poration submits this statement for the patients of the patients board of directors. I hereby according to the patients of the	of pose of changing its registered of the appointment as registered
40	Signature typed or printed normal of registered a	gress and the Capplicable (N		nt signat re reou	ined when reinstating)	DATE
12.	PD	DELETE	13.		ADDITIONS/CHANGES TO OFFIC	Change Addition
NAME	BRANDANO, JOAN		1.2 NAME	ĺ		_ , _
STREET ADDRESS	336 4TH AVE N.		1.3 STREET	ADDR(S\$		
CITY-ST-ZiP	TIERRA VERDE FL 33715	· · · · · · · · · · · · · · · · · · ·	1.4 C(TY - S)	I - 7IP		
TITLE	1	☐ DELETE	2111111	1		Change Addition
NAME			2.2 NAME			
STREET ADDRESS			23 STREET	1		
CITY-ST-ZIP TITLE	DELETE		2 4 CHY-S 3 1 TITLE	11 - 217	***************************************	Change Addition
NAME			3 2 NAME			
STREET ADDRESS			33 STREET.	ADDRESS		
CITY-ST-ZIP			34 CITY-S	1 - ZiP		
TITLE	DELETE		4.1 TO LE			Change Addition
NAME			4. 2 NAML			
STREET ADDRESS			4.3 STREET			
CITY-ST-ZIP TITLE			4.4 CHY+ \$1 5.1 T/1LE	- ZiP'		Change Addition
NAME			5.2 NAME	1		
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CH1Y-SI	- 1		
TITLE		DELETE	611HUF			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			8.3 STREET,			
CITY - ST - ZIP	1		6.4 CITY - S1	- 71P		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(-). 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 eath; 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 an attachment with an address.

ICHIATURE. M. A. Maral