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FILED
Feb 17 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P95000000152 (5)

1. Corporation Name
ERIC-MICHEL, INCORPORATED



Principal Place of Business Mailing Address
120 INTL PWY SUITE 124 LAKE MARY FL 32746 US
150 ESTATES CIRCLE LAKE MARY FL 32746-3045

3. Date Incorporated or Qualified 12/30/1994
3a. Date of Last Report 04/16/1996
4. FEI Number 59-3292835
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 120 INTL PKNY Suite, Apt. #, etc. 22 Suite 128 City & State 23 Heathrow FL Zip 24 32746 Country 25 Seminole 27 City & State 28 Zip 29 Country 30

9. Name and Address of Current Registered Agent
HUGHES, JOHN W
4966 SHORELINE CIRCLE
SANFORD FL 32771

10. Name and Address of New Registered Agent
81 Name SUZANNE M WIGGINS
82 Street Address (P.O. Box Number is Not Acceptable) 150 ESTATES CIRCLE
83
84 City LAKE MARY FL 85 Zip Code 32746

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Suzanne M Wiggins* SUZANNE M. WIGGINS President. 1/21/97
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS
TITLE D DELETE
NAME VILLALARD, ERIC M
STREET ADDRESS 1134 POINT NEWPORT TERRACE, #212
CITY-ST-ZIP CASSELBERRY FL 32707
TITLE D DELETE
NAME WIGGINS, SUZANNE M
STREET ADDRESS 150 ESTATES CIRCLE
CITY-ST-ZIP LAKE MARY FL 32746
TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE P. / D Change Addition
1.2 NAME WIGGINS, SUZANNE M.
1.3 STREET ADDRESS 150 ESTATES CIRCLE
1.4 CITY-ST-ZIP LAKE MARY FL, 32746
2.1 TITLE V / M / D Change Addition
2.2 NAME WIGGINS, DAVID C.
2.3 STREET ADDRESS 150 ESTATES CIRCLE
2.4 CITY-ST-ZIP LAKE MARY FL, 32746
3.1 TITLE C / T / S / D Change Addition
3.2 NAME WIGGINS, JACK L. JR.
3.3 STREET ADDRESS 332 N. 84TH ST.
3.4 CITY-ST-ZIP SEATTLE WA, 98103
4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-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 13 if changed, or on an attachment with an address.

SIGNATURE *Suzanne M Wiggins* SUZANNE M. WIGGINS 2-8-97 407-353-3571
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (9/96)