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

Mailing Address

P O BOX 770486

PROFIT CORPORATION ANNUAL REPORT

1997

appears in Block 12 or Block 13 if changer

SIGNATURE:

Principal Place of Business

12315 W COLONIAL DR



FLORIDA DEPARTMENT OF STATE

FILED

Feb 24 1997 8:00am

Secretary of State

(96/6)

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9500000835 (5)

LOUIS G. HECK CERTIFIED PUBLIC ACCOUNTANT, P.A.

WINTER GARDEN FL 34787 WINTER GARDEN FL 34777-0486 3. Date Incorporated or Qualified 3a. Date of Last Report 01/03/1995 03/26/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-3307525 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No Florida Statutes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HECK, LOUIS G 12315 W COLONIAL DR Street Address (P.O. Box Number is Not Acceptable) WINTER GARDEN FL 34787 83 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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. Familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition 1.1 TITLE THE HECK. LOUIS G NAME 1.2 NAME 12315 W COLONIAL DR 1.3 STREET ADDRESS STREET ADDRESS WINTER GARDEN FL 34787 City-St-76 1.4 CITY - ST - ZIP DELETE 21 TITLE Change Addition TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2 4 CITY-ST-ZIP CPY-SI-7P DELETE ___ Addition Change TITLE 31 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3 4. CITY - ST - ZIP CITY - ST- 7/2 DELETE Change ____ Addition TITLE 41 TITLE NAME 4 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 44 CITY - ST - ZIP DELETE 5 1 TITLE Change Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - \$1 - ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TILLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS. **6.3 STREET ADDRESS** 64 CITY-ST-ZIP

14. I do hereby cert by 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