	PROFIT RPORATION JAL REPORT		Sandra B Secretar	RTMENT OF STATE  3 Mortham  ry of State				
	1996 MENT # P9500	000397		CORPORATIONS				
	IAS F. MCMORROW, P.A.		` '	•				
•	e of Business	Mailing Addr	ess		ı indilindi ili ilkini bi	IIII <b>di</b> idi <b>di</b> ili <b>di</b>	IHA ODIAL ODIOL	I HILIO IDHIN IDEN DEN (BD)
SUITE 1836	PLACE BLVD. LLE FL 32207	SUITE 1836	RPLACE BLVD 6 /ILLE FL 3220		3. Date Incorporated or	Qualified	I. Dul	
Principal P	lace of Business	Adoiles A	al al a a	<del>-</del>	01/17/1995	······································	3a. Date	of Last Report
1	lase of Dusiness	2a. Mailing Ad 26	aaress		4. FEI Number 59 – 329	045	1	Applied For Not Applicable
Suite Apt.	#, etc	Suite, Apt	t #, etc		5. Certificate of Status I			\$8.75 Additional Fee Required
City & State	9	City & Sta	ite		6. Election Campaign Fi		 []]	\$5.00 May Be
Zip	Country 25	Zip 29		Country 30	8. This corporation has Florida Statutes	liability for in	tang ble tax	
	g, Name and Address of Curren	t Registered Agen	nt		10. Name and Address			
	CMORROW, THOMAS F 301 RIVERPLACE BLVD.				1791411			
S	UITE 1836			<u>L</u>	ddress (P.O. Box Number is No	t Acceptable	e) 	
	ACKSONVILLE FL 32207			83				
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	o the provisions of Sections 607.0603 egistered agent, or both, in the Shite o n familiar with, and accept the obliga	2 and 607,1508, Flo of Floridal Such cha at ons of Section 60	onda Statutes ange was au 07.0505 Fton	84 City s, the above-named conthonized by the corporadi. Statutes	orporation submits this statementation's board of directors. I here	nt for the purp aby accept the	<b>I</b> -1	85 Zip Code ariging its registered ment as registered
Pursuant to office or reagent. Lar	o the provisions of Sections 607,050 begistered agent, or both, in the State of familiar with, and accept the obligation for the providing of FICERS AND D	r archine Populcador DIDIRECTORS		1 1 1 1 1 1 1			pose of cha he appointn oss	ariging its registered ment as registered
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