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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # DOEDOOD 17\

1826 ANTHONY ST. 2826 AN				iiling Address B ANTHONY ST. IPA FL 33619-1812				3. Date Incorporated or Qualified 3a. Date of Last Report			
							01/23/199	5		26/1996	
- Principal I	Place of Busin	ess	h	Mailing Address			4. FEI Number 59-3290			<u> </u>	oplied For of Applicab
Suite, Apt	t #, etc.		26	Suite, Apt. #, etc.							Additional
<u></u>			27				5. Certificate d	of Status Desired		Fee R	equired
- City & Sta I	ate		28	City & State			6. Election Car Trust Fund (mpaign Financing			May Be to Fees
L Zір		Country		Zip	Countr	y		ation has liability for			
L		25	29		30		Florida Stati	utes [Yes [X No	
		and Address of Cur	rent Registe	ered Agent	81	II Name	10. Name and	Address of New Re	egistered	Agent	
POUKNER, FRANK E 2826 ANTHONY ST.							·		·····	··	
	MPA FL 3381	-			82	2 Street Ad	ddress (P.O. Box Num	nber is Not Acceptal	ble)		
1741	·,, /, / L 44 0 (•			83	3	<u> </u>			**	
					84	City	··			[85 ZID	Code
					-	1 0.0,			FL	100	
Pursuant office or	it to the provision registered age	ons of Sections 607.0	0502 and 607 ate of Florida	7.1508, Florida Sta Such change w	alutes, the above as authorized b	ve-named co by the corpor	orporation submits thi	s statement for the potors. I hereby acce	purpose o	f changing i	ts registere registered
agent 1	am familiar wit	n, and accept the or epinted name of registered	agert and title if a	applicable (, Florida Statute	9S.	orporation submits thi ration's board of direct quired when reinstating)		DATE		
agent 1 GNATURE	am familiar wit Signorie (getels	n, and accept the or epinted name of registered	oligations of, :	Section 607.0505 applicable (, Florida Statute NOTE: Registered A;	ent signature rec	quired when reinstating)	s statement for the potors. I hereby acce	DATE	D DIRECTOR	RS IN 12
agent 1 GNATURE 2.	Signification Si	n, and accept the of r punted name of registered OFFICERS	agert and title if a	applicable (NOTE: Registered A;	gent signature rec	quired when reinstating)		DATE		RS IN 12
agent 1 GNATURE L. HE	Signification of DP POUKNER	of FRANK E JR	agert and title if a	Section 607.0505 applicable (NOTE: Registered As 13. 1.1 TITLE 1.2 NAME	gent signature rec	quired when reinstating)		DATE	D DIRECTOR	RS IN 12
agent 1 GNATURE L LE ME REFT ADDRESS	Significe Greets DP POUKNER	n, and accept the of operations of registered OFFICERS , FRANK E JR HONY ST.	agert and title if a	Section 607.0505 applicable (NOTE: Registered As 13. 1.1 TITLE 1.2 NAME	gent signature rec	quired when reinstating)		DATE	D DIRECTOR	RS IN 12
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Secretary of State