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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9500008372 (1)

Principal Fran		Mailing Address 111 KEY HAVEN RD.			
STOCK ISLAN	D FL 33040	KEY WEST FL 33040-6221		3. Date incorporated or Qualified	3a. Date of Last Report
2. Principa F	Place of Business	28. Mailing Address	// 631	01/27/1995 4. FEI Number	05/01/1996 Applied For
21		26 314 Avenu	"A"	65-0567156	Not Applicable
Suite, Apt	#, etc	Suite Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22] City & Star		Qity & State		6 Floring Compaign Financia	Fee Required
23	•,	28 B16 C00 TT V	GV FIA	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for i	
24	25	29 33040 3	0 02		Yes No
	9. Name and Address of Cur	rent Hegistered Agent	81 Name	10. Name and Address of New Re	gistered Agent
	NBURY, RICHARD C KEY HAVEN RD.			600	
	WEST FL 33040		82 Street Addi	ress (P.O. Box Number is Not Acceptab	ie)
	, , <u>, , , , , , , , , , , , , , , , , </u>		83		<u></u>
			84 City		FL 85 Zip Code
agent Ta SIGNATURE	Withhell	- Aluxh	logislared Agent agnature requi		13/9/
12.	OFFICERS.	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
THILF NAME	SUNBURY, RICHARD	DELETE	1.1 TITLE 1.2 NAME		L.J. Change L. L. Additio
STREET ACCORESS	111 KEY HAVEN RD.		1.3 STREET ADDRESS		
C(TY+\$1+2)P	KEY WEST FL 33040	,	1.4 CITY - ST - ZIP		
TITLE	1	☐ DELETE	2 1 TITLE		☐ Change ☐ Addition
NAME			22 NAME		
STREET ADDRESS.			2.3 STREET ADDRESS		
OTY ST ZIE THILE		DELETE	2 4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-SF ZIP		DELETE	3.4. CITY - \$T - ZIP	·	Change Additio
TITLE NAME		□1 perrie	4.1 TITLE 4.2 NAME		Chands FT Worldon
STREET ADDRESS			4.3 STREET ADORESS		
Gilly-51-2#			4 4 CiTY - ST - ZIP		
TIPLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP THEF		DELETE	64 CITY-ST-ZIP		Change Addition
NAME		D percie	6.2 NAME		La cango La notito
STREET ADDRESS			63 STREET ADDRESS		
C(f) - S1 - ZIP			6.4 CITY - ST - ZIP		

NAME OF SIGNING OFFICER OR DIRECTOR

14. If do nereby 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 second 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 object or director of the consoration or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 illumanual, or on an alphact ment with an address.

FILED

Mar 31 1997 8:00am

Secretary of State