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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1997

DOCUMENT # P95000010568 (0)

ALYNNI, INC.

## **FILED** Apr 28 1997 8:00am Secretary of State



Principal Place 5434 W SAMPI MARGATE FL : US	LE RD	Mailing Address % STEVE BRANSCUM 2865 N.W. 68TH LANE MARGATE FL 33063-2041	ranscum BTH Lane			3. Date Incorporated or Qualified 3a. Date of Last Report			
						2/08/1995		05/01/1996	
	Place of Business	2a. Mailing Address	*******			El Number			Applied For
21 543	4 W.Sample Ra	26				65-0560394			Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	7.1/51/4		5, (	Certificate of Status Des	ired 🗆		Additional Required
City & Stat		City & State			l.	Election Campaign Fina	ncing		May Be
23     Y \C\r 200	gate +C Country	<b>28</b>	Coun	to		Frust Fund Contribution			d to Fees
24 330	273 25	_ <del> </del>	30	u <b>y</b>		This corporation has liab Florida Statutes	oliity for intan		rs. 199.032,
	9. Name and Address of Curren		<u> </u>			Name and Address of			
MAF	RINELLL, JOHN V		8	Name	в				
	1 N.E. 52ND ST.		-	12 Stree	t Address (P.	O. Box Number is Not A	cceptable)		
_	TE 10								
LIGH	1THOUSE POINT FL 33064			3					
			1	City				85 Z	ip Code
	to the provisions of Sections 607.050	00 1000 500 50 100 0				16 11 11 11 11 11			
SIGNATURE	T =	D DIRECTORS	13.		ore required when r	einstating) DDITIONS/CHANGES T			
Tr),F	D D	☐ DELETE	1 1 TITL					Chang	e
NAME	BRANSCUM, STEVE		1.2 NAM						
STREET ADDRESS	2885 N.W. 68TH LANE MARGATE FL 33063		1	EET ADDRESS	5				
City-St-7iP	D MANGATE PL 33003	DELETE	1.4 CITS 2.1 TITL	-ST-ZIP				Chang	e Addition
NAME	BRANSCUM, LINDA	hand to be a fine	2.2 NAN						
STREET ADDRESS	2865 N.W. 68TH LANE			EET ADDRESS	3				
City-St Zik	MARGATE FL 33063		2. 4 CIT	Y - ST - <b>ZI</b> P	<u> </u>				
TITLE		DELETE	3.1 TITL	E				☐ Chang	e 🔲 Addition
NAME			3.2 NAN						
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City - ST - ZiP Title		DELETE	3.4. CIT	Y-S1 - ZIP F	<u> </u>			Chang	e Addition
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Crty - St - ZIP				'-ST- <i>I</i> IP					
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TiT; F		☐ DELETE	6 1 TITL					Chang	e
NAME			6 2 NAN						
STREET ADDRESS				EET ADDRESS	5				
CITY-ST-7/P	by certify that the information supplie	d with this filing does not qualify		r-ST-ZIP	stated in Sec	tion 119 07/31/i) Florida	Statutos ! fo	urther certify th	at the

The management of the corporation of the corporation of the corporation 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: