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CORPORATION ANNUAL REPORT



FLORIDA DEPARIMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

P95000013174 (4) **DOCUMENT #**

1. Corporation MCKE	EVER REPORTING, INC.	Maling Address						
1662 PARK TERRACE. WEST ATLANTIC BEACH FL 32233		1662 PARK TERRACE. WEST ATLANTIC BEACH FL 32233						
					3. Date Incorporated or Qualified 02/15/1995	3a. Date	of Last F	Report
2. Principal Pla	ce of Business	2a. Mailing Address			4. FEI Number			Applied For
21 Suite, Apt. #	e)c	Suite, Apt. #, etc.			59.3301578			Not Applicable
22	, 0.0.	27			5. Certificate of Status Desired			Additional Required
City & State	·····	City & State			6. Election Campaign Financing			
23		28			Trust Fund Contribution			O May Be d to Fees
Ζφ 24	Country 25	Ζφ 29	Count	try	8. This corporation has liability for Florida Statutes X Yes			
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New F	Registered A	Agent	
MOVEE	WED FLICE F		8	31 Name				
MCKEEVER, ELISE F 1662 PARK TERRACE, WEST ATLANTIC BEACH FL 32233			a	32 Street Add	dress (P.O. Box Number is Not Acceptat	ole)		·
				33	·			
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			8	City		FL	85 Zi	p Code
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I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this amount report to resupplemental 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

IGNATURE:

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER ON DIRECTOR

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER ON DIRECTOR

SIGNATURE: