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 # P95000025973 (5)

City & State

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SONO-PLS, INC.				
Principal Place of Business	Mailing Address			
6149-51ST TERRACE NORTH ST. PETERSBURG FL 33709	6149-51ST TERRACE NORTH ST. PETERSBURG FL 33708-3530			
		3. Date Incorporated or Qualified 03/29/1995	3a. Date of Last Report 09/09/1996	
2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied	
21	26	59-3309216	Not Appl	
Suite, Apt # etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additio	

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City & State

Zip

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9. Name and Address of Current Registered Agent SINDEN, WATSON R 501 FIRST AVENUE, NORTH SUITE 404 ST. PETERSBURG FL 33709

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Country

					5.00 May Be dded to Fees
у		 This corporation has Florida Statutes 	liability for intang	ible tax ui	nder s. 199.032,
	11	0. Name and Address	of New Register	ed Agent	
Nar	ne		······································		
Stre	et Address	(P.O. Box Number is No	ot Acceptable)		
1					
City				85	Zip Code
	Nar Stre	Name Street Address	Trust Fund Contribut 8. This corporation has Florida Statutes 10. Name and Address Name Street Address (P.O. Box Number is No.	Florida Statutes Yes 10. Name and Address of New Register Name Street Address (P.O. Box Number is Not Acceptable)	Trust Fund Contribution 8. This corporation has liability for intangible tax us Florida Statutes Yes No 10. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable)

FILED

May 02 1997 8:00am

Secretary of State

Applied For Not Applicable \$8.75 Additional Fee Required

Sections, 607,0502 and 607,1508, Florida Statutes, the a 11. Pursuant to the provisions of office or registered agent, or both, in the Stage of Florida Such change wathrorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Jem familiar with and accept the obligations of Sprofon 607.0505, Elegica Statutes. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13 Addition DELETE Change THEE 11 TITLE SMALL, PATRICIA L 1.2 NAME NAME 6149 51ST TERR N 13 STREET ADDRESS STREET ADDRESS ST. PETE FL 33709 1.4 CITY - ST - ZIP CITY-ST-76 DELETE Change Addition TIME 2.1 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition 3 1 TITLE TIT_F 32 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS OLY-SI-ZP 3.4. CITY-ST-ZIP Change Addition DELETE THEF 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 44 CITY - ST - ZIP CICY-St-ZIP Change Addition DELETE 5 1 TITLE TILLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP 0/1Y - \$1 - 7/F DELETE Change Addition 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS CITY - \$1 - 20P 6.4 City-ST-ZIP

14. I do hereby 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 angular sport 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 officer or director of the corporation or the receiver or master empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

0376438