SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/1/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) WILL Sty. FLORIDA DEPARTMENT OF STATE



CORPORATION ANNUAL REPORT 1996	Sandra B. M Secretary of DIVISION OF COR	of State		
DOCUMENT # P9 KEENOTE ADVERTISING,	5000027093 (0)			
REENUTE ADVENTISING	INO.			
Principal Place of Business	Mailing Address	ANALY .		I NEILU ILEIL FUUIT VUITU IUTUU EILI INEI
3034 ANNADALE CIRCLE 3034 ANNADALE CIRCLE BRANDON FL 33511 BRANDON FL 33511				
			3. Date incorporated or Qualified 03/31/1995	3a. Date of Last Report
2. Principal Place of Business 1 411 South ars	oxs Que 26 911 5'. PARS	sons AUC.	4. FEI Number 59-33299.	Applied For Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required
SKITE T	City & State	- <i>E</i> /	6. Election Campaign Financing	\$5.00 May Be Added to Fees
BRANDOR, 1-1 Zip 33511 Couptry		Country USA	Trust Fund Contribution 8. This corporation has liability for in Florida Statutes 10. Name and Address of New Re	ntangible tax under si 199.032, Yes N
	ss of Current Registered Agent	81 Name	10. Name and Address of New Ac	gistered Agent
JEFFRIES, DAVID M 220 S FRANKLIN STREET		82 Street Addr	ess (P.O. Box Number is Not Acceptab	le)
TAMPA FL 33602		83		
		84 City		FL 85 Zip Code
SIGNATURE	ons 607 0502 and 607.1508, Florida Statutes in the State of Florida Such change was ault up the obligations of, Section 607.0505, Florida Statutes agent and the diapplicable (NOTE)	horized by the corporate da Statutes Registered Agent signatum (eq.)	ed when reinstating)	DATE
2. OF	FFICE'RS AND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12 Change Addition
	L. KEETON nadale Circle don, Fl. 33511	1.3 STREET ADDRESS		
CITY-ST-ZIP BRAND	Olon, Fl. 3351/	1.4 C(TY - ST - Z)P 2.1 T(TLE		Change Addition
NAME	_	2 2 NAME		
STREET ADORESS OTY-ST-ZIP		2 3 STREET ADDRESS 2 4 CITY - ST - ZIP		
TITLE	DELETE	31 TITLE 32 NAME		Change Addition
NAME Street address		33 STREET ADDRESS		
CITY-ST-ZIP	DELETE	3 4 CITY - ST - ZIP 4 1 TITLE		Charge Addition
NAME		4 2 NAME		
STREET ADDRESS CITY-ST-ZIP		4.9 STREET ADDRESS 4.4 CITY-ST-ZIP		
TITLE	DELETE	5 1 TITLE		Change Addition
NAME STREET ADDRESS		5 2 NAME 5 3 STREET ADDRESS		
CITY-ST-ZIP	DOUTE	5.4 CHY - ST - ZIP		Change Addition
TITLE NAME	L DELETE	6 1 TITLE 6 2 NAME		
STREET ADDRESS		6 3 STREET ADDRESS		
City-St-ZiP 14. I do hereby certify that the inform	nation supplied with this filling is voluntarily furn	nished and does not qua	alify for the exemption stated in Section	119 07(3)(k), Florida Statutes T all have the same legal effect as if
further certify that the information made under oath; that I am an of that my name appears in Blocks!	lation supplied with this tiling is voluntarily in indicated on this annual report or supplement ficer or director of the corporation or the recei 2 or Block 13 if changed, or on an attachment	ntal annual report is true iver or trustee empower t with an address.	ed to execute this report as required by	Chapter 617, Florida Statutes, and
SIGNATURE:	win I boton	Treside	ut 8/1/96	813-684-6111
SIGNATUR	RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER	R DIRECTOR	field	Erayton e Pakinse M