SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000027204 (3) MARK WILLIAMS, P.A.												
IVANIA VI	HILLIMIO, F.A.											
Principal Place	e of Business	Mailing Ac	dress									
12613 NEW BR	RITTANY BLVD.	12613 NEV	V BRITTANY BLV	/D.								
300	ri 60003	300	FI 80000				D	O NOT WRITE	IN THIS SPAC	CE.		
FORT MYERS I	rt 3380/	FT. MYERS US	S FL 33907			3.	Date Incorporated	· · · · · · · · · · · · · · · · · · ·	3a. Date o		eporl	٦
							04/05/1995_		08/09/	1996		
	lace of Business	2a. Mailing	Address		····	4.	FEI Number	,		Apr	plied For	
21	# ala	26	5 mt # ala				65-0569132				Applicable	2
Sulte, Apt. 4	#, Q IC.	27	Apt. #, etc.			5.	Cortificate of Statu	is Desired	□ >	წ./ ე A. Fee Red	dditional gulred	
City & State	9	City &	State			6.	Election Campaig	n Financing		5.00	<u> </u>	1
23		28				I	Trust Fund Contrib	_		Added to		
Zip	Country	Zip		Country	у	I	This corporation o		_			
24	9. Name and Address of C	29		30			Personal Property Name and Addre				No	_
			gent	81	Name		Name and Addre	ss of New Heg	istered Ager	<u> </u>		\dashv
	RPORATION INFORMATION	I SERVICES INC.										
	1 HAYS STREET LAHASSEE FL 32301			82	Street	Address (P	O. Box Number is	Not Acceptabl	e)			ļ
IALL	LANASSEE PL 32301			63								7
•				84	City			·····	100	Zip C	`odo	4
				٦	City				FL B	Zip C	,00 0	1
office or re	to the provisions of Sections 60 egistered agent, or both, in the	 State of Elorida, Such 	i change was a	uthorized b	withe con	corporation	submits this state	ment for the pu	rpose of cha	nging its	registered	1
agent, Lar	m familiar with, and accept the	obtantions of Contin	Combings was a									
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SIGNATURE	Signature, typed or printed name of registr			rida Statute Registered Ag	98.	required when	reinslating)		SHOTE DATE ERS AND DIR	92_		100
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4. I do hereby certify that the information supplied with this fiting does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental ainual 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.

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Sep 18 1997 8:00am

Secretary of State