FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Mailing Address R. 1202 MONTE LAKE DR. VALRICO FL 33594 3. Date Incorporated or Qualified 03/31/1995 3. Date Incorporated or Qualified 03/31/1995 4. FEI Number Applied For Not Applicable Suite, Apt. #, etc. 5. Certificate of Status Dosired
mess Mailing Address R. 1202 MONTE LAKE DR. VALRICO FL 33594 3. Date Incorporated or Qualified 03a. Date of Lest Report 03/31/1995 4. FEI Number Applied For Not Added to Fee Required City & State 6. Election Campaign Financing S5.00 May Be Added to Fees 28
R. 1202 MONTE LAKE DR. VALRICO FL 33594 3. Date Incorporated or Qualified 03/3 1/1995 3. Date Incorporated or Qualified 03/3 1/1995 4. FEI Number Applied For Not Applicable Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required City & State City & State Country Zip Country 25 29 30 Florida Statutes Trust Fund Contribution Added to Fees Applied For Not Applicable \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution Added to Fees Added to Fees Not Applied For Not Added to Fees Trust Fund Contribution Added to Fees Added to Fees 10. Name and Address of New Registered Agent 11. Name Street Address (P.O. Box Number is Not Acceptable)
R. 1202 MONTE LAKE DR. VALRICO FL 33594 3. Date Incorporated or Qualified 03/3 1/1995 3. Date Incorporated or Qualified 03/3 1/1995 4. FEI Number Applied For Not Applicable Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required City & State City & State Country Zip Country 25 29 30 Florida Statutes Trust Fund Contribution Added to Fees Applied For Not Applicable \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution Added to Fees Added to Fees Not Applied For Not Added to Fees Trust Fund Contribution Added to Fees Added to Fees 10. Name and Address of New Registered Agent 11. Name Street Address (P.O. Box Number is Not Acceptable)
3. Date Incorporated or Qualified O3/31/1995 Susiness 2a. Mailing Address 25 Sulte, Apt. #, etc. 27 City & State 28 Country 29 Country 20 Country 21 Country 22 Country 25 Country 26 Country 27 Country 28 Country 30 Country 40 Count
3. Date Incorporated or Qualified U3/31/1995 3. Date Incorporated or Qualified U3/31/1995 3. Date of Last Report U3/31/1995 4. FEI Number
Suite Applied For Not Applicable
Applied For Sulte, Apt. #, etc. Sulte, Apt. #, etc.
Suite, Apt. #, etc. City & State City & State Country Zip Country Zip Country Zip Country State Country Added to Fees This corporation has liability for intangible tax under s 199.032, Florida Statutes Fiorida Statutes No Name and Address of New Registered Agent State Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable)
City & State City & State Country Zip Country Zip Country Zip Country Zip Country Added to Fees 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Fee Required Fee Required \$5.00 May Be Added to Fees 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No No Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable)
Country Zip Country Zip Solution Added to Fees 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No In Name and Address of New Registered Agent 81 Name REDR. 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable)
Country Zip Country 25 29 30 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No lame and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RH A AKE DR. 83 84 85 86 86 87 86 86 86 87 88 88 88 88 88 88 88 88 88 88 88 88
25 29 30 Florida Statutes Yes No Iame and Address of Current Registered Agent 10. Name and Address of New Registered Agent If A AKE DR. Issee
81 Name [H A 82 Street Address (P.O. Box Number is Not Acceptable) AKE DR. 83
FH A AKE DR. 82 Street Address (P.O. Box Number is Not Acceptable) 83 83
AKE DR. 83
83
rovisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office
at, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am accept the obligations of, Section 607.0505, Florida Statutes.
typed or printed name of registered agent and title if applicable (NOTE Registered Agent) signature registered when reinstating) DATE OFFICERS AND DIRECTORS IN 12
DELETE 1.1 Tifle Change Addition
TH, KENNETH A 1.2 NAME
2 MONTE LAKE DR. 13 STREET ADDRESS
RICO FL 33594 1.4 CITY-ST-ZIP
22 NAME
2 3 STREET ADDRESS
2.3 STREET ADDRESS 2.4 CITY-ST-ZIP
23 STREET ADDRESS 24 CITY - \$1 - ZIP DELETE 3.1 TITLE Change Addition
23 STREET ADDRESS 24 CITY-ST-ZIP DELETE 3. 1 TITLE Change Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
2 3 STREET ADDRESS 2 4 CITY-ST-ZIP 3 1 TITLE Change Addition 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY-ST-ZIP DELETE 4.1 TITLE Change Addition
2 3 STREET ADDRESS 2 4 CITY-ST-ZIP 3 1 TITLE Change Addition 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY-ST-ZIP DELETE 4.1 TITLE Change Addition 4 2 NAME
2 3 STREET ADDRESS 2 4 CITY-ST-ZIP 3 1 TITLE Change Addition 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY-ST-ZIP DELETE 4.1 TITLE Change Addition
2 3 STREET ADDRESS 2 4 CITY-ST-ZIP 3 1 TITLE 3 2 NAME 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY-ST-ZIP Change Addition Change Addition Addition Change Addition Addition Addition Addition
2 3 STREET ADDRESS 2 4 CITY-ST-ZIP 3 1 TITLE Change Addition 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY-ST-ZIP
2 3 STREET ADDRESS 2 4 CITY-ST-ZIP DELETE 3 1 TITLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY-ST-ZIP DELETE 4.1 TITLE 4 NAME 4 3 NAME 4 3 STREET ADDRESS 4.4 CITY-ST-ZIP DELETE 5 1 TITLE 5 NAME 5 3 STREET ADDRESS
2 3 STREET ADDRESS 2 4 CITY-ST-ZIP DELETE 3 1 TITLE 3 2 NAME 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY-ST-ZIP DELETE 4.1 TITLE 4 2 NAME 4 3 STREET ADDRESS 4 4 CITY-ST-ZIP DELETE 5 1 TITLE Change Addition Addition
ITH, KENNETH A 1.2 NAME 2 MONTE LAKE DR. 1.3 STREET ADDRESS RICO FL 33594 1.4 CITY-ST-ZIP

14. 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 annual report 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 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.

63 STREET ADDRESS

64 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY - ST - ZIP

OFFICER OR DIRECTOR

4/17/96 813-681-1534

CR2E034 (12/95)