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 # P95000029894 (9)

Country

WEYLIN E. FISCHER INC.

Principa	al Flace of E	Business
	CHEROKEE	AVE

Suite, Apt. #, etc.

City & State

21

22

23

2. Principal Place of Business

Mailing Address

5908 N CHEROKEE AVE TAMPA FL 33604-6714

2a. Mailing Address

City & State

Suite, Apt. #. etc.

26

28

FILED Apr 17 1997 8:00am Secretary of State



4-11-97 813-238-94

8. This corporation has liability for intangible tax under s. 199.032,

3a. Date of Last Report

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

08/08/1996

3. Date Incorporated or Qualified

NOT APPLICABLE

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

04/15/1995

FEI Number

Signature, typest or provided name of rigistered agent and bits of applicable. NOTE: OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 THE PD	24		29	[30]		Florida Statutes	L Yes L		
TAMPA FL 33604 B2 Street Address (P.O. Box Number is Not Acceptable) B3		9. Name and Address of Current R	egistered Agent		. 	10. Name and Address of	New Registered Ag	ent	
TAMPA FL 33804 B3	FIS/	CHER, WEYLIN E		81	Name				
TAMPA FL 33804 B3			,	82	Street A	ddress (P.O. Boy Number is Not	Acceptable)		
11. Fursiant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, 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 and manner with and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. City 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. Change Addition 17. NAME City St. 2/P Change Addition 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO OF				"	Lucion	Sured Address (F.O. Box Number is Not Acceptable)			
11. Fursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature by the corporation's board of directors. I hereby accept the appointment as registered agent 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature byte of period mene of ingistered agent and tire if applicable (NOTE: Repistered Agent alignature required when reimitating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. THILE PD DELETE 1.1 TITLE PD DELETE 1.2 NAME SIRRET ADDRESS CITY-SI-2IP TAMPA FL 33804 1.4 CITY-SI-2IP TAMPA FL 33804 1.4 CITY-SI-2IP TAMPA FL 33804 1.4 CITY-SI-2IP TAMPA FL 33804 1.5 TREET ADDRESS CITY-SI-2IP DELETE 3.1 TINE DELETE 3.1 TINE DELETE 3.1 TINE DELETE 3.1 TINE DELETE 3.2 NAME 3.3 SIRRET ADDRESS CITY-SI-2IP DELETE 4.1 TINE DELETE 4.1 TINE DELETE 4.1 TINE Change Addition	•••			83	1				
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11. Fursions to the provisions of Soctions 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, 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 gent am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature				84	City		EI	85 Zip	Code
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14. I do bereby codify that the information supplied with this filling does not qualify for the exemption stated in Section 110.07(3)(i) Florida Statuto I further codify that the	14. Ldo heret	by certify that the information supplied wi	th this filing does not qualif	y for the eve	motion etc	ated in Section 119.07(3)(i), Florid	a Statutes. I further c	ertify 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									