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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

	1996 Secretary of State DIVISION OF CORPORATIONS		IONS					
DOCUME 1. Corporation Name	NT # P9 5	0000326	35 (1)				
•	NTERPRISES, INC.							
Principal Place of Bu	ısiness	Mailing Ad-	dress					
66 LIMA ST	66 LIM							
PUNTA GORDA I	FL 33983	PUNTA	GORDA FL 339	B3		3. Date Incorporated or Qualified 04/24/1995	3a. Date of Last F	eport
. Principal Place of	f Business	2a. Mailing	Address			4. FEI Number 65-0577258		Applied For Not Applicable
Suite, Apt. #, etc		26 Suite, /	Apt. #, etc.			5. Certificate of Status Desired	\$8.79	5 Additional
City & State		27 City &	State	· — ·		6. Flection Campaign Financing		Required May Be
		28				Trust Fund Contribution	Adde	ed to Fees
Zip	Country	Zip 29		Coun 30	try	This corporation has liability for Florida Statutes	Intangible tax under s	130.002,
	Name and Address of C		gent	301		10. Name and Address of New F	tegistered Agent	
					Name			
BOWIE, RO	ONALO I			<u> </u>	32 Street Add	ress (P.O. Box Number is Not Acceptate	ole)	
66 LIMA S								 -
)RDA FL 33983			[]	33			
				ŀ	84 City		FL 85 2	Zip Code
or registered ag familiar with, ar	gent, or both, in the State of accept the obligations of the types of prilited name of register	f. Section 607.0505, F	e was aumonze Iorida Statutes	a by the c	o poration a bot	ration submits this statement for the purify of directors. Thereby accept the applications of the purify of the applications o	9.29.9	06
12.	OFFICE	RS AND DIRECTORS	F1 pr. F11	13.	·	ADDITIONS/CHANGES TO OFF	-ICERS AND DIRECT	
TITLE		1	DELETE	1 1 11		CLAIRE C. BOWLE	71 o 101191	<u>_</u>
NAME				12 NA	REEL ADDRESS	CE IMA TO		
STREET ADDRESS					07. 7:0	2 DU ONABLOTTE PL	. 33983	
DITY-ST-ZIP			DELETE	2 1 1	TLE.	SEC/TRES RONALD I BOWLE GO LIMA ST	☐ Change	Add tion
NAME				2 2 NA	ME .	DONALD I BOWLE		
STREET ADORESS				2351	REET ADDRESS	66 LIMA ST.		
CITY-ST-ZIP				24C-	TY-ST-ZiP	PORT CHARLOTTE PX		. Fill Addition
TITLE			☐ DELFTE	3 1 TI	TLE		Change	e 🔲 Addition
NAME				3 2 N				
STREET ADDRESS					REET ADDRESS			
CITY+S1-ZIP			רון הכובדר		TY - ST - ZIF		Chang	e Addition
TITLE			DELETE	4 1 7				-
NAME				4 2 N	HEFT ADDRESS			
STREET ADDRESS					TY-SI-ZIF			
CITY-ST-ZIP			DELETE	5 1 1		44,413,144	☐ Chang	e 🔲 Addition
TITLE				52 N	!			
NAME STREET ADDRESS					TREET ADDRESS			
CITY-ST-ZIP				ı	TY-SI-ZIP			
TITLE			DELETE	6 1 1	ILLE		☐ Chang	ge 🔲 Addition
NAME				6.2 N	AME			
CTOECT ADDDESC				635	TREET ADDRESS			

14. If 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 certify 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.

SIGNATURE:

STREET ADDRESS

ROUALO I. BOWLE 4-29-96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LIST.

6.4 CHY - \$1-7IP

941-625-7007

Dayline Prone II