FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 16 1997 8:00am

Secretary of State

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

	AVE.								
					ŀ	3. Date Incorporated or Qualified		ate of Last F	Report
2. Principal Pi	ace of Business	2a. Mailing Address				05/03/1995 4. FEI Number		09/1996	pplied For
21		26				59-3311250		}	of Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.				5. Cortificate of Status Desired			Additional
22		27		··					equired
City & State	9	Cily & State			ĺ	6. Election Campaign Financing			May Be
Zip	Country	[28] Zip	Country			Trust Fund Contribution 8. This corporation has liability for			10 Fees
24	25	r 1	30		1		Yes [. 199.032,
	9, Name and Address of Curre					10. Name and Address of New R	egistered	Agent	
	KER, BRANDY		81	Name					
	HAWKES AVE		82 Stree			s (P.O. Box Number is Not Accepta	ble)		
ORLA	NDO FL 32809								
			83						
			84	City			FL	85 Zip	Code
agent. I ar SIGNATURE	o the provisions of Sections 607.05 agistored agent, or both, in the Statin familiar with, and accept the obliging the state of registered agreement to the obliging of the control of	gations of, Section 607.0505, Flo	es, the above uthorized by rida Statules			ation submits this statement for the is board of directors. I hereby according to the statement of the state	purpose o	f changing it pointment as	ts registered registered
12.		ND DIRECTORS	13.		•	ADDITIONS/CHANGES TO OFFI	CERS AN	DIRECTOR	1S IN 12
TITLE	P	DELETE	1.1 TITLE		VICC	e President		Change	Addition
NAME	WALKER, BRANDY L		1.2 NAME	i	21/1	nts arrast Jr 20 Hawkes Aue	_		
STREET ADDRESS	1022 HAWKES AVE.		1.3 STREET		100	19 HAWKES HUE			
CITY-ST-ZIP	ORLANDO FL 32809	DELETE	1.4 C(TY - ST	· 71P	OKI	ANDO, FL 3280	27	Change	Addition
TITLE NAME				2.1 TITLE 2.2 NAME				Change	L Addition
STREET ADDRESS			2.3 STHEEL	ADDOLOG	i				
CITY-ST-ZIP			2.4 CITY-S	······ \					
TITLE		DELETE	3.1 TITLE			7. 74. 74. 74. 74. 74. 74. 74. 74. 74. 7		Change	Addition
NAME			3.2 NAME	ſ	[
STREET ADDRESS			3.3 STREET	ADDRESS					
CITY-ST-ZIP		and the second s	3.4. CHY-S	1-ZIP	. .				
TITLE		T DEFETE	4.1 TillE	,				Change	
NAME CYCLET ADDRESS			4. 2 NAME	40000000					
STREET ADDRESS			4.3 STREET						
CITY-ST-ZIP TITLE		DELETE	5.1 TILLE	- <u>/ ir</u>		······································		Change	Addition
NAME			5.2 NAMC	ł	1			<u>.</u>	
STREET ADDRESS			5.3 STREET	ADDRESS					
CITY-ST-ZIP			5.4 DHY- ST	- Z tP					. 1
TITLE		DEFLIF	6.1 1/11/					☐ Change	Addition
NAME			6.2 NAME						
STREET ADORESS			6.3 STREET A	1					
CITY-ST-ZIP	v certify that the information supplie	ed with this filing does not gualdy	6.4 City-St for the exer	ontion st	tated in	Section 119.07(3)(i), Florida Statute	es. I furthe	r certify that	the
information	indicated on this annual report or	supplemental annual report is tri	ue and accur	rate and	that my	y signature shall have the same leg s required by Chapter 607, Florida	at effect as	s if made und	der oath: tha