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

PROFIT CORPORATION ANNUAL REPORT 1996  DOCUMENT # P9500036115 (0)								
1	EVELOPMENT, INC.		` '				-	
Principal Place of Business Mailing Address  14907 BARBY RD. 14907 BARBY RD.  TAMPA FL 33625 TAMPA FL 33625								
O Dinalest Di						ate Incorporated or Qualified 05/08/1995	3a. Date of La	st Report
2. Principal Place of Business 2a. Mailing Address 2f			38			Number	(	Applied For
27			Apt. #, etc.			ertificate of Status Desired		Not Applicable  .75 Additional  ee Required
City & State	3 28		State			ection Campaign Financing ust Fund Contribution	□ \$ <u>\$</u>	5.00 May Be dded to Fees
Zip 24	Country 25	Zip <b>29</b>	30	ountry	8. 7h	is corporation has liability for orida Statutes Yes	intangime tax und	ers 199.032,
	9. Name and Address of Curre	ent Registered Agent		81 Name	10. Na	ame and Address of New R		
CANTWELL, RICH 14907 BARBY RD. TAMPA FL 33625				83 S4 City	City 85 Zip Code			
familiar with SIGNATURE _	of the provisions of Sections 607.050 and agont, or both, in the State of Florin, and accept the obligations of, Sections, and accept the obligations of Sections, and accept the obligations of Section (Section 2018).	ction 607.0505, Florida St nt and title it applicable NO DIRECTORS	(NOT): Registere	id Agent signature	required when reinsta	ors. Thereby accept the appo	DATE	ereo agent. I am
NAME STREET ADDRESS CITY-ST-ZIP	KICHARD J. CANT 14907 BANDI TAMPA FL	uell preside Ane 33625	2VT   1.21   133   1.40	TITLE NAME STREET ADDRESS CITY+ST-ZIP			Chan	GRZE034 (295)
NAME STREET ADDRESS CITY-ST-ZIP	Joseph U. CAN 3820 LINKUOU New PORT Richar	# ST. 34657	235	Title Name Street Address City-St-Zip			☐ Chan	ge 🗌 Addition 💆
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	321 33.	TITLE IAME STREET ADDRESS ITY-ST-ZIP			☐ Chan	ge Addition
NAME STREET ADDRESS City-St-Zip		☐ DELETE	4.2 h	IITLE IAME ITREET ADORESS ITY-ST-ZIP			☐ Chan	De Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELFTE	5 11 52 N 5.3 S	ITTLE IAME THEET ADDRESS			Chang	ge Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	certify that the information supplied	☐ DELFTE	6 17 6.2 N 6.3 S	ITY-SI-ZIP  ITLE  AME  TREET ADDRESS  ITY-ST-ZIP	, [	<b>900001-85</b> -06/07/96010 ***200.00	<b>등등 1 골드</b> ( 77026	e Addition

I do nereby 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). Fiorida 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 appears in Block 12 or Block 19 if charged, g on an attachment with an address.

SIGNATURE:

SNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/96 (813) 968-7870