## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)



**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # POSOCOCOCO (4)

## FILED 97 SEP 15 AM 9:51

SECDETABY OF STATE

		COMPANY, INC.	<i>,</i> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	991 ( <del>4</del> )				AHALLAT				
Principal Place of Business Mailing Address							····		EDIOU HATE	rifi <b>s (D)(0</b>		{ <b>       </b>
4851 NE 101ST AVE P O BOX 611												
BRONSON FL 32621 BRONSON FL 32621												
								DO NOT WRITE				
								3. Date Incorporated or Qualified 05/10/1995		te of La: <b>)2/199</b> (		ort
2. Principal P	lace of Busin	ness	28.	Mailing Address				4. FEI Number		-, 100		ed For
21			26	26				59-3312523		<u>                                 </u>		pplicable
Sulte, Apt.	#, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State				City & State				6. Election Campaign Financing \$5.00 May Be				
23			28	28				Trust Fund Contribution Added to Fees				
Zip		Country		Zip				8. This corporation owes or has paid the current year Intangible				
24	25			9 30				Personal Property Tax due June 30. 🔲 Yes 🔛 No				
		and Address of Curre	nt Registe	ored Agent				10. Name and Address of New Re	gistered	Agent		
TERI	ry, Lonnii	G			,	81	Name					
	NE 10181						Street Add	ress (P.O. Box Number is Not Acceptate	ole)			
BRO	NSON FL	32621										
						83						
						84	City		FL	85 2	Zip Cod	de
11. Pursuant office or ragent. I a	to the provis registered ag am familiar w	ions of Sections 607.05 gent, or both, in the Stat ith, and accept the obli	02 and 60 e of Florida ations of,	7.1508, Florida Statu a. Such change was Section 607.0505, Fl	tes, the ab authorized orida State	oove i by utes	e-named corpora the corpora	poration submits this statement for the partion's board of directors. I hereby acce	ourpose of of the app	changir ointment	ng its reg	egistered gistered
SIGNATURE												
12.	Signature, typed	or printed name of registored a OFFICERS AI			13.	Age	eni signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE SERS AND	DIRECT	OBS I	N 12
TITLE	PVTS	OTTOETO A	TE TOTAL CO	DELETE	1.1 Til	LE			22,10,71140	Chan		Addition
NAME		ONNIE G			1,2 NA					_	_	_
STREET ADDRESS 4851 NE 101ST AVE						1.3 STREET ADDRESS						
CITY-ST-ZIP	BRONSO				1.4 CIT							
TITLE					2.1 TITLE				Chan	ge [	Addition	
NAME					22 NA	ME						
STREET ADDRESS					2.3 ST	REET	ADDRESS					
CITY-ST-ZIP	<u></u>				2 4 0	1Y-8	SF-ZIP					
TITLE				DELETE	3.1 717	LE				Chan	ge [	Addition
NAME &	1				3.2 NA	ME		3000022 -09/18/ ****17	297	20:	3-	Ei
STREET ADDRESS	1				3.3 S1	REET	ADDRESS	-09/18/	970	1085	00	)5
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NAME					4. 2 N	AME						ŀ
STREET ADDRESS	)				4.3 ST	REET	ADDRESS					)
CITY-ST-ZIP	<b></b>	*			4.4 CI		T-ZIP					
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NAME					5.2 NA							
STREET ADDRESS	ļ				4		ADDRESS			,	1	ι
CITY-ST-ZIP	ļ . <del></del>			F 1 22. 222	5.4 CIT		T-ZIP			_/	_#	
TITLE				DELETE	6.1 717					□ Chan	<i>@/}</i> / 5	Addition
NAME					6.2 NA					16	7V	
STREET ADDRESS					63 ST	REET	ADDRESS			6	مر	
OCD / OT TIO												

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

LSIGNATUREL RECHIRED

SILLIAN

362-401 , 2491

Please find enclosed the annual report for 1997. This is the 2nd Notice - however we never click series our feist notice. I called cend was told this letter would be required along with our narmal payment of \$165.00 and \$8.75 for certificate of 570 tus. for a total of \$173.75.

Louis Terry Lomie S. Terry