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 # P95000044868 (4)

APOPKA BLIMPIE, INC.

FILED Apr 21 1997 8:00am Secretary of State

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Principal Place of Business Mailing Address							
2434 EAST SEMORAN BLVD. APOPKA FL 32703		POST OFFICE BOX 15110		hango			
		POST OFFICE BEASE POST OFFICE B.	110- OL /S WA	710	Date Incorporated or Qualified 06/02/1995	3a. Date o	f Last Report
2. Principal Place	of Business	2a. Mailing Address		4. FEI Number		Applied For	
21		26 2627 Ball	ind	Aug-	59-3315506		Not Applicable
Suite, Apt. #, e	sic.	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 Trust Fund Contribution Added to Fees			
Zip 24	Country 25	29 52835 30	Country		8. This corporation has liability for li Florida Statutes		
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
WALTERS, LAWRENCE G ESQ.			81	Name			
444 SEABREEZE BLVD. SUITE 800			82	Street Address (P.O. Box Number is Not Acceptable)			
DAYTONA BEACH FL 32118			83				
			64	City		FL 8	Zip Code
office or regis	stered agent, or both, in the S	0502 and 607.1508, Florida Statutes, tale of Florida, Such change was aut bligations of, Section 607.0505, Floric	norized by	the corporation	oration submits this statement for the pon's board of directors. I hereby accept	urpose of cha t the appointr	nging its registered nent as registered

SIGNATURE Signature, typod or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required whon reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CR2E034 (9/96) DELETE Change Addition 1.1 TITLE TITLE EDWARDS, HOWARD KEAY NAME 1.2 NAME 2827 BALLARD AVENUE STREET ADDRESS 13 STREET ADDRESS ORLANDO FL 32833-4037 CITY-ST-ZIP 1.4 CiTY-ST-7)P DELETE TITLE 2.1 TITLE Change Addition NAME EDWARDS, CAROL 2.2 NAM6 2827 BALLARD AVENUE STREET ADDRESS 2.3 STREET ADDRESS ORLANDO FL 32833-4037 CITY-ST-ZIP 2. 4 City - S1 - ZiP DELETE TITLE Addition 3.1 TO LE EDWARDS, HOWARD KEVIN NAME 3.2 NAME 2827 BALLARD AVENUE STREET ADDRESS 3.3 STREET ADDRESS ORLANDO FL 32833-4037 CITY-ST-ZIP 3 4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 C(1Y - \$1 - ZIP DELFTE Change Addition 5.1 THLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY - S1 - 7IP DELETE Change Addition TITLE 61 TITLE NAME STREET ADDRESS 6.3 STREET ADDRESS

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 eath; 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 attrichment of the corporation of the

SIGNATURE: At 1/5097(407) 884-4555