FILE NOW: FILING FEE AFTER MAY 1 18, \$550.00



COF ANNI	PROFIT RPORATION UAL REPORT 1997	Sandra B Socretai DIVISION OF C	TMENT OF STATE . Mortham y of State CORPORATIONS		
C & C	OWN RD., #30				
9 Principal C	Pace of Business	2a. Mailing Address		 3. Date Incorporated or Qualified 06/26/1995 4. FEI Number 	3a. Date of Last Report 05/01/1996
21	INCO DI DUSTRIOSS	26		65-0600177	Applied F
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Addition
22 City & Stat	10	City & State			Fee Required
23 City & Stat	io	28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Country	Zip	Country	8. This corporation has liability for in	tangible tax under s. 199.03
24	9. Name and Address of Current		30	10. Name and Address of New Rec	Yes No
GUI	MSON, RICHARD P ESQ.		81 Name		in the right
11. Pursuant office or r agent. I a SIGNATURE	to the provisions of Sections 607.0502 registered agent, or both, in the State our familiar with, and accept the obligations of the section o		s, the above-named cor uthorized by the corpora rida Statutes. Registered Agent signature requ	poration submits this statement for the pition's board of directors. I hereby acception when reliefation.	rpose of changing its register the appointment as register
12. (18) b	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICE	
thite is a	D	DELETE	1.1 10LE		Change Ad
NAME STREET ADDRESS	CHARLES, CHRISTOPHER M 153 SIMS CREEK LANE JUPITER FL 33458		1.2 NAME 1.3 STREET ADDRESS		
CITY-ST-ZIP	D	DELETE	1.4 CHY-S1-ZIP 2.1 TIYLE		☐ Change ☐ Ad
NAME	MONTANERO, TODD S		2.2 NAME		
STREET ADDRESS	111 PENNOCK LANE JUPITER FL 33458		2.3 STREET ADDRESS		
CITY-ST-ZIP	JUPILEN FL 33430	DELETE	2. 4 City-St-ZiP 3.1 Title		Change Ad
NAME		L. Decere	3.2 NAME		C. Change C. Av
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	3.4. CHY-SI-ZIP	·	
TITLE NAME		☐ DETERE	4.1 TITLE 4.2 NAME		Change Ad
STREET ADDRESS			4.2 MAINE 4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Ad
NAME Street address			5.2 NAME		•
CITY-ST-ZIP			5.3 STREET ADDRESS 5.4 City - St - Zip		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Ad
NAME			6.2 NAME	1	
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	ov certify that the information supplied		6.4 CI1Y - ST - ZIP		

I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f). Florida Statutes. I further certify that the information indicated on this 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 SIGNATURE