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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	P95000051321	(4)
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	erick C. Thacher, C.P.A.	, P.A.					
Principal Place of Business Mailing Address 9165 128TH WAY NORTH SEMINOLE FL 34646 SEMINOLE FL 34646		PRTH	··· •	T TORTHOGOLISM TREAT DAIN ORAN CON.		D FRANK IFRIK INGOL INDI 18 4 1	
					3. Date incorporated or Qualified 06/30/1995	3a. Date	of Last Report
	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
Suite, Apt.	# ptc	Suite, Apt. #, etc.			59-33329	76	Not Applicable
22	n, etc.	27			5. Certificate of Status Desired		\$8.75 Additional Fee Required
Orty & State	e	City & State			6. Election Campaign Financing		\$5.00 May Be
23		28	····		1rust Fund Contribution		Added to Fees
Zip 24	Country 25	Z ρ	Country		8. This corporation has liability for		x under s. 199.032,
<u></u>	9. Name and Address of Currer	29 Anent	30		Florida Statutes Yes 10. Name and Address of New I	s No	
			81	Name	TO. Hame and Address of New I	ueAisreteg t	(gerit
THACHE	er, frederick c		82	Otroct Add	ress (P.O. Box Number is Not Acceptal	kt/a\	
	8TH WAY NORTH		02	Street Addi	ress (m.O. Box number is not Accepta	biej	
SEMINO	ILE FL 34646		83				
			84	City			85 Zip Code
				l named corpor oration's boa	ration submits this statement for the pured of directors. Thereby accept the app	FL pripose of char	nging its registered office registered agent. Lam
familiar wit	th, and accept the obligations of, Sect	ion 607.0505. Èlorida Statute	ic.				agiota do agont. Fum
_			ю.				
SIĞNATURE _	Signature, typed or printed game of reasoned agent			15.1.10.6. 0	Shirten constant 2	D. W	
SIĞNATURE _	Signature, typed or printed name of registered agent	and title if accordance (N	OIL Registered Again	I signature техриге	· · · · · · · · · · · · · · · · · · ·	DATE	DIRECTORS IN 12
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certify that the information indicated on this arriual 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 a proddress.

SIGNATURE:

3/26/96 813-393-8941