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**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000054702 (2)

## **FILED** May 07 1997 8:00am Secretary of State

Principal Place of Business Mailing Address  1716 MIZELL AVENUE 1716 MIZELL AVENUE WINTER PARK F: 32789 WINTER PARK F: 32789-5228										
							3. Date Incorporated or Qualified 07/13/1995	1	e of Last R	leport
2. Principal Piac	ce of Business	2a. M.	ailing Address			· · · · · · · · · · · · · · · · · · ·	4. FEI Number			oplied For
21		26					59-3359122			ot Applicable
Suite, Apt.#,	, etc	1—¬	uite, Apt. #, etc.				5. Certificate of Status Desired			Additional equired
City & State		[27] Ci	ity & State	<del></del>		<del> </del>	6. Election Campaign Financing	<del></del>		May Be
23		28	.,				Trust Fund Contribution			may be to Fees
Zφ	Country	Zi	ip	Cor	intry	<del></del>	6. This corporation has liability for	intangible		
24	25	29		30			Florida Statutes	Yes 🔀	No	
	9. Name and Address of Currer	nt Register	ed Agent				10. Name and Address of New Re	glatered A	gent	
AINSV	vorth, Marion				81	Name				
1716 MIZELL AVENUE				82 Street Ad		ress (P.O. Box Number is Not Acceptat	ole)			
WINTE	ER PARK F; 32789				83	, <u>,</u>	·			
					84	City		FL	<b>85</b> Zip	Code
<b>11</b> D	the provisions of Continue 607 060	00 000 507	1EOO Florida Cto	tutos thos		named sorn	poration submits this statement for the ption's board of directors. I hereby acception		abanalaa ii	to sociatorod
SIGNATURE	rammar with, and accept the cong								<del></del>	<del></del>
	OFFICE AN				o Agent	arg. cara c rectar	red when reinstalling)  ADDITIONS/CHANGES TO OFFICE	DATE PEDG AND	DIRECTOR	OC IAI 19
12.	OFFICERS AN		ORS	13.		ag and requi	ADDITIONS/CHANGES TO OFFIC			
<b>12.</b> TILE	PVST			13. 1.1 Ti	TLE	3.9. Calabo 1043.9			DIRECTOR Change	
12. TITLE NAME	PVST AINSWORTH, MARION		ORS	13. 1.1 Ti 1.2 Ni	ITLE AME					
TITLE NAME STREET ADDRESS	PVST AINSWORTH, MARION 1716 MIZELL AVENUE		ORS	13. 1.1 Ti 1.2 Ni 13 S	ITLE AME TREET AL	DDRESS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST AINSWORTH, MARION 1718 MIZELL AVENUE WINTER PARK F; 32789		ORS	13. 1.1 Ti 1.2 Ni 13 S	TLE AME TREET AL	DDRESS				Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PVST AINSWORTH, MARION 1718 MIZELL AVENUE WINTER PARK F; 32789 D		DRS DELETE	13. 1.1 TI 1.2 NI 13 S 1.4 C 2.1 TI	ITLE AME TREET AL ITY-ST- ITLE	DDRESS			Change	Addition
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T12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY ST-ZIP	PVST AINSWORTH, MARION 1716 MIZELL AVENUE WINTER PARK F; 32789 D AINSWORTH, MARION 1716 MIZELL AVENUE		DELETE DELETE	13. 1.1Ti 12 N 13 S 1.4 C 2.1 Ti 2.2 N 2.3 S 2.4 C 3.1 Ti 3.2 N 3.3 S 3.4 C 4.1 Ti	THE  AME TREET AT  TY-ST- THE  AME TREET AT  CITY-ST- THE  AME TREET AT  CITY-ST-	DDRESS ZIP DORESS - ZIP DORESS - DORESS			Change Change Change	Addition Addition
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The constancy dentities into material supplies with this annual report or supplies and quality for the exemption states in Section 119.07(5)(i), Florida Statutes. I further certify that 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 attachment with an address.

SIGNATURE: