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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

P95000057582 (5)

DOCUMENT # DECISIONS, INC



Principal Place of Busine	ess	Malling Address							
575 N. HIGHWAY 17-92 LONGWOOD FL 32750			575 N. HIGHWAY 17-92 LONGWOOD FL 32750						
					 Date Incorporated or 07/24/1995 	Qualified	3a. Date	of Last R	eport
2. Principal Place of Bu	siness	2a. Maiting Addre	ess		4. FEI Number	276	77	1	Applied For
i]		26			<u> </u>	2XC) 1 1		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #,	Suite, Apt. #, etc.		5. Certificate of Status	Desired			Additional
2		27							Required
City & State	And the second s	City & State			Election Campaign F Trust Fund Contribut	tion		Adde	O May Be d to Fees
Zip 4	Country 25	Ζφ 29	30	ountry	B. This corporation has Florida Statutes	Yes	□No		199.032,
9. Na	me and Address of Curi	rent Registered Agent			10. Name and Address	s of New R	egistered /	Agent	
				81 Name					
LIVINGSTON, (575 N. HIGHW					Address (P.O. Box Number is Not Acceptable)				
LONGWOOD F				83					
				84 City			FL	85 Zi	p Code
or registered agent, familiar with, and ac	, or both, in the State of Fl coept the obligations of, So	lorida. Such change was lection 607.0505, Florida	authorized by the Statutes.	e corporation's bo	pard of directors. I hereby acco	ept the appo	ointment as	registered	agent. i am
SIGNATURE SIGNATURE	ped or printed name of rug stered as	gent and title if a micable	(NOTE: Register	red Agent signature requ	ilred when reinstating		DA†E		
	sed or printed name of rug stered as OFFICERS A	gent and title if a spicable AND DIRECTORS	(NO1E: Register		ired when reinstating. ADDITIONS/CHANG	ES TO OFF		DIRECTO	DRS IN 12
Sign allowty	OFFICERS /		13			ES TO OFF	CERS AND	DIRECTO	DRS IN 12
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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.

Gregg Livingston

5-1-96 Date

407-645-8992 Daytime Phone I