FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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PROFIT FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham, ANNUAL REPORT™ Socretary of States 97 AUG 20 PH 3: 26 1997 **DIVISION OF CORPORATIONS** DOCUMENT # P95000067123 SECRETARY OF STATE TALLAHASSEF FLORIDA CHED Principal Place of Business Mailing Address 1323 6.581407 7428 SW 14 CT. 6417E 460 N. MUSERSALE, FL 33068 N. LAYBELBILL 3. Date Incorporated or Qualified 3a. Date of Last Report JEC, 33068 09109 2. Principal Place of Business 2a. Mailing Address Applied For 65-0616/// Not Applicable 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State . City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Zip Country 8. This corporation has liability for Mangible tax under s. 199.032, Florida Statutes Yes \square No 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent B1 Name Jones PATRICIE 20210 RAVENDALE COURT GAITHERS DUTG, MARYLAND 82 83 84 23068 NORTH. GUSEL SALE 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of the stat (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) DELETE 1.1 TO LE Change Addition TITLE HIM GEORGE 1.2 NAME NAME 1 3 STREET ADDRESS STREET ADDRESS 14 CITY - ST - ZIP CITY-ST-ZIP <u>M. Lahdeldale</u>, Fc DELETE TITLE 2 1 TITLE Change NAME 2.2 NAME 7428 SW MCT 2.3 STREET ADDRESS STREET ADDRESS M. LOUDERVALE, FL 2 4 CITY - ST - ZIP CITY - ST - ZIP TITLE DELETE 3.1.11111 Change Addition NAME 3.2 NAME 600002273596---STREET ADDRESS 3.3 STREET ADDRESS -08/21/97--01065--005 CHY-ST-7P 3 4. CITY - ST - ZIP DELETE TITLE 4.1 T:TLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - \$1 - ZIP DELF.TE Change Addition MILE 51 TITLE NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY-ST-2IP 54 CHTY-ST-ZIP TITLE DELETE Change Addition 6 1 THE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6 4 CITY-ST-ZIP 14. To 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 amount 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.

5/31/97

(454) 732-9948

GEORGE CHIN