FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Sporotony of State

19	996	DI		ORPORATIONS					
DOCUM 1, Corporation No	ENT # P950	0006973	33 (0)						
•	TY CUSTOM CONTRA	188888							
Principal Place of	Business	Mailing Addr	ess			1 EALL AND 11 AL	Tret Marie Arsia earn	10000 11100 1111 1201	
106 BAYOU DE	106 BAYO		***						
FT. WALTON BEACH FL 32547		FT. WALTO	on Beach Fl	. 32547	1 ** * * * * * * * * * * * * * * * * *	3. Date Incorporated or Qualified 3a. Date of Last Report 09/11/1995			
2. Principal Place	e of Business	2a. Mai⊩ng A	ddress		4. FEI Number 59 – 33436	57		Applied For Not Applicable	
Suite, Apt. #,	etc.	26 Suite, Ap	it. #, etc		5. Certificate of Status De		\$8.	.75 Additional	
22		27						ee Required	
City & State		City & St	ate		6. Election Campaign Fin Trust Fund Contributio			5.00 May Be dded to Fees	
Zip	Country	28] Zip		Country	8. This corporation has lie				
24	25	29		30	Florida Statutes	Yes Yes			
	9. Name and Address of Cu	urrent Registered Ago	ent	81 Name	10. Name and Address	of New Reg	gistered Agent		
1486505	N/ DALED EDANI/(IN)			1, 1	t Address (P.O. Box Number is Not	Agoogt ablo			
	iy, david franklin Du drive			82 Stree	t Address (F'.O. Box Number is not	Ассертаске;	i		
	TON BEACH FL 32547			83					
• • • • • • • • • • • • • • • • • • • •				84 City	<u> </u>		85	Zip Code	
	*				corporation submits this statement f	ne Blun en ren	FL S	its registered office	
familiar with, SIGNATURE	, and accept the obligations of,	Section 607.0505, Flor	rida Statutes	E. Rogistinea Agent signal is			DATE		
12.	OFFICER:	S AND DIRECTORS	DELETE	13. 1 1 HILE	ADDITIONS/CHANGE	5 TO OFFIC	JERS AND DIRE		
TITLE NAME	J	السا	LOCCUL	1.2 NAME	P David F Hardes	1 + 17		<i>y</i> 	
STREET ADDRESS	_			1.3 STREET ADDRESS	106 Payou Dr	_			
CITY-ST-ZIP				1.4 CITY - \$1 - 21P	Ft. Walton Bch	. Fl.	32547		
TITLE			DEFELLE	2 1 THE	V/P		bd Cha	ange 🔲 Addition	
NAME				2.2 NAME	David W Hardes	ty	N		
STREET ADDRESS				2.3 STREET ADDRESS 2.4 CITY IS CIZIP		way A	Apt.C		
CITY-ST-ZIP TITLE) DELETE	3 1 TULE 4	Ft. Walton Bch	 	-32348 [Cna	ange 💽 Addition	
NAME				3 2 NAME	Teresita Harde	etv			
STREET ADDRESS				3.3 STREET ADDRES	106 Bayou Dr.	cy			
CITY - ST - ZIP) DELETE	3.4 CITY - S.1 - ZIP 4. 1 TITLE	Ft. Walton Bch	. Fl	. 3254♂	ange 🔲 Addition	
TITLE NAME		L	y Decemb	4 2 NAME			6	<u></u>	
NAME STREET ADORESS				4.3 STREET ACORES	7 0000	1186	30197	7	
CITY-SI-2IF				4.4 CITY - ST - ZIP	* 70000 -06/12/9 ***200.00	3011	03015		
TITLE] DELETE	5 1 TITLE	***200.00)	☐ Ch	ange 🔲 Addition	
NAME				5.2 NAME	se l				
STREET ACCRESS				5.3 STREET ADDRES 5.4 CITY: ST-ZIP	n l				
CITY-ST-ZIP TITLE] DELETE	6 1 TITLE		-	☐ Ch	iange 🔲 Addition	
NAME		L .		6 2 NAME				5/	
STREET ADDRESS				6.3 STREET ADDRES	ss !			110	
City-ST-ZiP			T	6.4 CITY - \$1 - 7iP	and for the appending stated in C	action 1107	OZIGIJEL Florida	Statutes further	
certify that		is annual report or supp corporation or the rec	olemental anni eiver or trustoi	uai report is true and e en powered to e xe	qualify for the exemption stated in Si accurate and that my signature sha cute this report as required by Chap				

SIGNATURE AND TYPED OF PRINTED NAME OF SENING OFFICER OR DIRECTOR

APRIL 29, 96 904.864.3222