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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000075696 (1)

		Mailing Address 1400 COLONIAL BLVD #52 FORT MYERS FL 33907-105			
PONI MIENS	rt 33907	FOR WIERO PE 33307-100	77	3. Date Incorporated or Qualified	3a. Date of Last Report
				10/02/1995	05/01/1996
 '	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0610278	Not Applicable
Suite, Apt.		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	le	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	Zip	Country	Trust Fund Contribution	Added to Fees
24	25	······································	30	8. This corporation has liability for in	ntangible tax under s. 199.032, Yes No
24	9, Name and Address of Curre		130	10, Name and Address of New Reg	_
1400	/ER, JOYCE D-52 COLONIAL BLVD MYERS FL 33907		81 Name 82 Street Add 83 84 Cit	SCOPT Weir	skin
office or agent. I a SIGNATURE	Signature, typed or printed name of regustered ag	ont and little if applicable (NOTE	11X L	poration submits this statement for the p tion's beare of directors. I hereby accep to high roussaling) ADDITIONS/CHANGES TO OFFIC	B-1547
TITLE	PD	DELETE	1.1 THUE		Change Addition
NAME	MAYER, JOYCE	·	1.2 NAME		
STREET ADDRESS	11640 SPOONBILL LANE		1.3 STREET ADDRESS		
CITY-ST-ZIP	FORT MYERS FL 33913		1.4 CITY-ST-ZIP		
TITLE	PD	DELETE	2.1 TITLE		Change Addition
NAME	mayer, Ica		2.2 NAME		
STREET ADDRESS	116 AD 2600 UPI	1 LN 1 33913	2.3 STREET ADDRESS		
CHTY-ST-ZIP TITLE	- 1- Myess, F	DELETE	2. 4 CITY - S1 - ZIP 3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - S1 - ZIF		
TITLE		DELETE	4.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP	1.		4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY - ST - ZIP			5 4 CITY-ST-ZIP		
TITLE		DELETE	61 TITLE		Change Addition
NAME			62 NAME		
STREET ADDRESS			63 STREET ADDRESS		

14. I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same logal 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

CITY-ST-ZIP

1964 MININGSUE

6-17-42

9V1334466UU

FILED

Jun 19 1997 8:00am

Secretary of State