

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

PROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000085180 (4)

1. Corporation Name

A-1 RESOURCES, INC.



Principal Place of Business

Mailing Address

10138 LORETTO ST.
SPRING HILL FL 34608

11186 SPRING HILL DRIVE, SUITE 112
SPRING HILL FL 34609

3. Date Incorporated or Qualified
11/06/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 **116 COMMERCIAL WAY**
Suite, Apt. #, etc.

26 **116 COMMERCIAL WAY**
Suite, Apt. #, etc.

4. FEI Number
59-3346547

Applied For
Not Applicable

22 **UHL PLAZA SUITE 3**
City & State

27 **UHL PLAZA SUITE 3**
City & State

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 **SPRING HILL FL.**
Zip Country

28 **SPRING HILL FL.**
Zip Country

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24 **34606** 25 **USA**

29 **34606** 30 **USA**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JANEY, JOSEPH F
10138 LORETTO ST.
SPRING HILL FL 34608

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 Zip Code

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 Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D <input type="checkbox"/> DELETE
NAME	SHARMAN, GRAHAM A
STREET ADDRESS	518 ALADDIN ROAD
CITY - ST - ZIP	SPRING HILL FL 34609
TITLE	D <input type="checkbox"/> DELETE
NAME	JANEY, JOSEPH F
STREET ADDRESS	10138 LORETTO ST.
CITY - ST - ZIP	SPRING HILL FL 34608
TITLE	D <input type="checkbox"/> DELETE
NAME	TRIOLA, STEPHEN J
STREET ADDRESS	6188 KRISTA DRIVE
CITY - ST - ZIP	SPRING HILL FL 34609
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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.

SIGNATURE:

Joseph F. Janey

JOSEPH F. JANEY

4/25/96

Date

352-686-2909

Daytime Phone #

CR2E034 (12/95)