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

PROFIT



ELORIDA DEPARIMENT DE STATE

	RPORATIO UAL REPO 1996			Secr	ra B. Mortha retary of State DF CORPORA	e •					
DOCU 1. Corporatio	MENT # on Name	P950	00085	5448 (5)	997 - 1 186					
SPINE	LLI CONST	RUCTION CO.	•								
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Principal Place	e of Business		Mailın	g Address	······································						
416 NORTH LAKE WORT				North H St. E worth FL 334	160 *						
2. Principal Pi	face of Business		2a t.i	olling Add			11/	ricorporated or Qualified 06/1995	3a. Date o	f Last F	Report
21	ILOC OF EXCONECES	•	26	ailing Address			4. FEI NU	mber 0634640			Applied For
Suite, Apt.	#, etc.			ite, Apl. #, etc]				Not Applicable
City & State			27		·		5. Certific	cate of Status Desired			Additional Required
23	···		28 Cit	ly & State				n Campaign Financing und Contribution		\$5.0 Adde	O May Be d to Fees
Zip 24]	25		Ziķ		Cour 30	try	8. This co	orporation has liability for Statutes	intangible tax u	under s	199.032,
	9. Name an	d Address of Cur	rent Registere	d Agent				and Address of New F		ent	
ADMINI		_			į.	81 Name			2		· · · · · · · · · · · · · · · · · · ·
	LI, THEODORE	E			t	32 Street A	Address (P.O. Box	Number is Not Acceptab	le)		
	rth H St. Orth Fl 334	len.			I.	33		·	,		
CANE III	Onin FL 334	00			I.	33					
					Į	34 City				85 Zij	o Code
11. Pursuant t	to the provisions	of Sections 607.08	502 and 607.15	08, Florida Statu		e-named co	rooration submits	his statement for the run	<u>FL</u>		
11. Pursuant t or register familiar wit	to the provisions od agent, or bot th, and accept the	of Sections 607.08 h, in the State of Fi ne obligations of, Si	502 and 607.15 lorida Such cha ection 607.050	508, Florida Statu ange was authori 5, Florida Statute		e-named co	rporation submits board of directors.	Inis statement for the pur I hereby accept the appo	<u>FL</u>		
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odin, mat 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: Patricia Spinell. Patricia Spinell. Patricia Spinell V, S

(407) 582-6873 Daysine Prions #