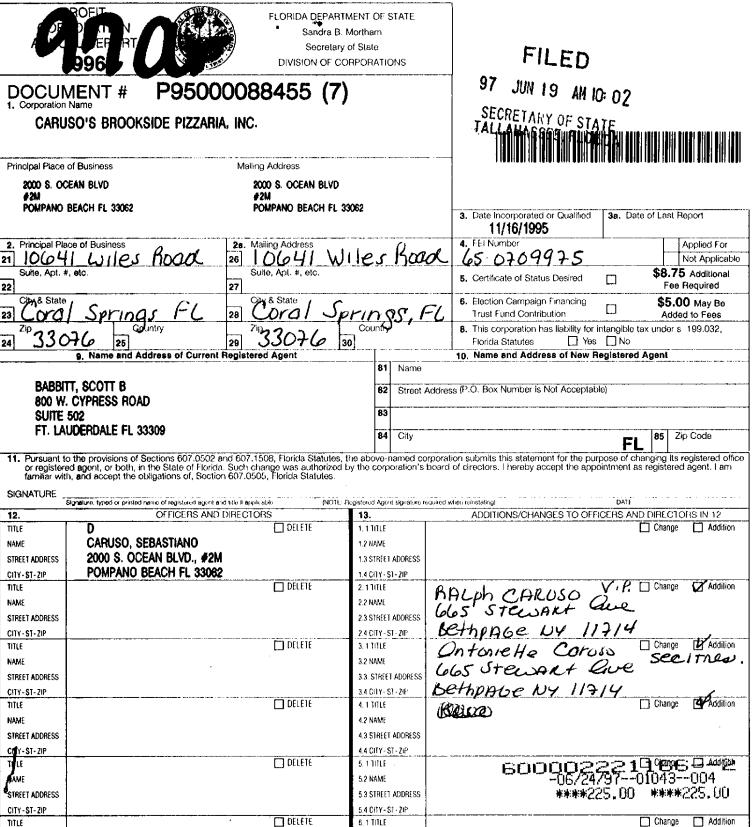
FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00



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.

6.2 NAME

6.3 STREET ADDRESS 6.4 City- S1 - Zip

SIGNATURE: Sel antia un Cumo Signature and typed on printed name of signing officer on director

NAME

STREET ADDRESS

CITY-ST-ZIP

6/1197 Dat

Daytime Phone #

CR2E034 (12/95)