## 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 # P95000090085 (8)

AXIS 23, INC.

Principal Plac	e of Busine
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Mailing Address

## **FILED** Jan 27 1997 8:00am Secretary of State



9510 COLONY ODESSA FL 33		9510 COLONY DRIVE ODESSA FL 33556-4704							
					3. Date Incorporated or Qualified 11/27/1995	3a. Date of t	of Last Report /1996		
2. Principal Place of Business 28. Mailing Address					4. FEI Number		Applied	J For	
21 3112 Chamblee Lane   26 3112 Chamblee   Suite, Apt #, etc.			lee I	ane	APPLIED FOR 65-(	632867	·	plicable	
Suite, Apt #, etc Suite, Apt #, etc. Suite, Apt #, etc. 27 Clearwater, FL 34619				346	5. Certificate of Status Desired		.75 Addit ee Require		
City & State City & State				340	6. Election Campaign Financing \$5.00 May Be				
23 28					Trust Fund Contribution Added to Fees				
Zip	Country	8. This corporation has liability for	ntangible tax un	nder s. 199	0.032.				
24	25		30		Florida Statutes	Yes 🔲 No			
	9. Name and Address of Curren	t Registered Agent		l Name	10. Name and Address of New R	gistered Agent			
	MER, GARY E		81	81 Name					
	RY E. FARMER, CPA, PA		82	Street #	Address (P.O. Box Number is Not Acceptab	ole)			
	9-13 EHRLICH RD. IPA FL 33625		83	<u> </u>		···		·	
IAM	IFA FL 33020								
			84	City		FL  85	Zip Code	<b>9</b>	
office or re agent. Far SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida. Such change was au ations of, Section 607.0505, Flori	ithorized by ida Statute	y the corp s.	corporation submits this statement for the poration's board of directors. I hereby accept	ot the appointme	jing its regi	stered	
	Signature: typed or printed name of registered age			enusangia tre	required when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE	OTODO IN	40	
12.	OFFICERS AND	DELETE	13.			ENS AND DIRE		Addition	
NAME	LEWIS, FENWICK	_ press	1.2 NAME		D		manger term	, 1100111011	
STREET ADDRESS	9510 COLONY DRIVE		1.3 STREET	ADDRESS	Lewis, Fenwick				
CITY-ST-7(P	ODESSA FL 33556		1.4 CITY-S	J	3112 Chamblee Lane				
TITLE		DELETE	2.1 TITLE		Clearwater, FL 346	1 <del>9</del> 0	nange 🔲	Addition	
NAME			2.2 NAME	1					
STREET ADDRESS			2.3 STREET	ADDRESS					
CITY - ST - ZIP			2. 4 CITY -	ST-ZIP					
TITLE		DELETE	3.1 TITLE	J		il Cr	nange	Addition	
NAME			3.2 NAME						
STREET ADDRESS			33 STAEET						
CITY-ST-ZIP	And the control of th	DELETE	3.4 City -	SI-ZIP		☐ CI	nanne I	Addition	
NAME		T percit	4.2 NAME			<b>□</b> "	iongo I	j radiouir	
STREET ADDRESS			4.3 STREET	- 1					
CITY-ST-ZIP			4.4 CITY-S	(	•				
TITLE		☐ DELETE	5.1 TITLE			☐ Ci	nange [	Addition	
NAME			5.2 NAME	}					
STREET ADORESS			5.3 STREET	ADDRESS	$\frac{1}{V}$				
CITY-S1-ZIP			5.4 CITY - 5	ST-ZIP					
TITLE		☐ DELETE	61 TITLE	7		Ç	nange	Addition	
NAME			62 NAME		·				
STREET ADDRESS			6.3 STREET	ADDRESS					
CITY-ST-ZIP			6.4 CITY - 5	ST-ZIP					

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 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

SIGNING OFFICER OR DIRECTOR

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