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

**PROFIT** 



FLORIDA DEPARTMENT OF STATE

ANNUAL REPORT  1996					Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS										
[] 1.	OCUN Corporation HARDW	MENT Name ARE, INC		00094	223 (1)	)				1 11 4 11 64 1 14		1 <b>24</b> 53 <b>48</b> 58 1	<b>1</b> 44 <b>111</b> 17 11 <b>1</b> 41 1	<b>                                     </b>	
Pr	incipal Place	of Business		Mailın	g Address		<del></del>								
	059 RANGE F LEARWATER				RANGE ROAD ARWATER FL 34625	j									
										12/12/19	rated or Qualified		ate of Last Re	hode	
	Principal Pla	Place of Business			2a. Mailing Address				4. FEI Number 59 - 3	?	••••••••••••••••••••••••••••••••••••••	-	Applied For		
21	Suite, Apt. #	# etc			Suite, Apt. #, etc.				39.5	35026	<u> </u>		Not Applicable Additional	<u>}</u>	
22	оонс, <i>г</i> фг. <del>«</del>	ψι. *, διο.			27					5. Certificate of	Status Desired			Required	
	City & State	ale			City & State						paign Financing			May Be	
23	Ζφ	Country			<b>28</b>   			Country		Trust Fund C				to Fees	
24	<del></del>	25			29 30					8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No					
		9. Name	and Address of (	Current Register	ed Agent		B1	Name		10. Name and	Address of New	Registere	d Agent		
		enn d Nge Road Ater fl 3					82 83	Street A	Addres	s (P.O. Box Numb	er is Not Accept	able)			
							84	City				F	<b>L</b> 85 Zip	Code	
11	. Pursuant to or registere familiar with	o the provision and agent, or the and accep	ons of Sections 60 both, in the State of the obligations o	7.0502 and 607.1 of Florida. Such ch f, Section 607.050	508, Florida Stalut lange was authoriz 05, Florida Statutes	es, the abo ed by the o	orpo	amed co ration's l	rporati board	ion submits this st of directors. I here	atement for the peby accept the ap	ourpose of o pointment	changing its re as registered	egistered offic agent. I am	ю
SI	GNATURE -	Skmatura tvovrti	or printed name of register	ed about and tile if appli	rahle (NC	)TE: Flenisterer	I Agent	sionature re	en iioad w	her: reinstating)		DATE			.  _
12		OFFICERS AN						9.00.00		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					ှို
TiT					DELETE		1. 1 TITLE			sident/Dia			Change	X Addition	CR2E034 (12/95)
NAME										nn D. Witt					25
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TIT					DELETE			- 21r	OTE	arwater, I	L 34023		Change	Addition	"
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	NAME					3.2 NAME						C Cusudo			
STREET ADDRESS							3.3 STREET ADDRESS								
CITY-ST-ZIP							3.4 C(1) - S1 - 2(P			<b>.</b>					
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	FEET ADDRESS					4		ADDRESS - 7IP							
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NAME			_				5.2 NAME						•		
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I	LE AAC				DELETE	6 1 7							Change	Addition	
l	ME REET ADDRESS					62 N 63 S		ADDRESS							

CITY-S1-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 logal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee enipowered 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:

SIGNATURE:

SIGNATURE

5/01/96

(813) 621-0079

Description: