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 # P95000096091 (0)

Principal Place of Business	Mailing Address	
3637 PHILLIPS HIGHWAY #140 JACKBONVILLE FL 32207	3637 PHILLIPS HIGHWAY #140 JACKSONVILLE FL 32207	3226%
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FILED Jun 17 1997 8:00am Secretary of State



Principal Place	of Business	Mailing Address			YDDII BANIN \$510 DINK ODEN IDIDI IND 1801
JACKSONVILL		3837 PHILLIPS HIGHWA JACKSONVILLE FL 3220			
<u>\$</u>		1 m / le		3. Date Incorporated or Qualified 12/18/1995	3a. Date of Last Report
2. Princk F,	Prainess	2e. Malling Address		4. FEI Number 5 9 - 3 44 63 9	Applied For Not Applicable
Sulte, Apt.	#, etc. BAI	BY WAREHOUSE, 1	NC.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		6727 Přillips Iswy. #405 Jackso nville, FL 32256		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	intangible tax under s. 199.032,
24	25 9. Name and Address of Cu	rrent Registered Agent	30	Florida Statutes	No Registered Agent
-	#, 1201110 2112 LIGHT 00 01 00	traffigurator Wholis			
GRENHA	M, OLETUS E		20 0000	BAINE CO	RESHAM
	ILLIES HIGHWAY-#140		82 Street Add	ress (P.O. Box Number is Not Acceptate	Hwy #405
	NVILLE FL 32207		83	7	
			84 City	$\mathcal{I}_{A} \times \mathcal{I}_{C}$, leaf 7 to Conta
1			84 City	•	FL 85 Zip Code へく
11. Pursuant t or register samiliar wit	o the provisions of Sections 607.0 ed agent, or both, in the State of f th, and accept the obligations on §	502 and 607.1508, Florida Statute Florida. Such change was authorize Section 607.0505, Florida Statutes	es, the above-named corpored by the corporation's boa	ration submits this statement for the pur rd of directors. I hereby accept the app	pose of changing its registered office ointment as registered agent. I am
SIGNATURE	January 12	reshan		-	3/27/97
	Signature, typed or printed name of registered		TE: Registered Agont a gnature require		
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
TITLE	Control of the contro	VOELETE	1.1 Title 1	. game gres	ham Change Chádition Lent Lent Change Chádition
NAME		p Co	1.2 NAME	owner , rese	dent
STREET ADDRESS	1	₹	1.3 STREET ADDRESS	8727 Omlly	22 Huy #1405
CITY-81-ZIP		Z ITMOELETE	1.4 CITY-ST-ZIP 2. 1 TITLE	- Jox I F	Change Addition
NAME Presi	Cletus Br	ishen Delete igs Huy 4140 32207	2.2 NAME	•	C change C Addition
STREET ADDRESS	3637 Phill	yn Huy #140	2.3 STREET ADDRESS		
CITY-ST-ZIP	gaux, fi	212 07	2.4 CITY-ST-ZIP		İ
TITLE		DELETE	3, 1 TITLE		Change Addition
NAME		1	3.2 NAME	,~	
STREET ADDRESS			3.3. STREET ADDRESS		
CITY+ST-ZIP			3.4 CITY - ST - ZIP		1
TITLE		DELETE	4. 1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5. 1 TITLE		Change Addition
NAME			5.2 NAME	40000221	L5514
STREET ADDRESS	,		5 3 STREET ADDRESS	40000221 -06/18/97010 ***165.00	13U~-028
CITY-ST-ZIP			5 4 CITY-ST-ZIP	***165.88	
TITLE		DELETE	6 1 TITLE	·	☐ Change ☐ Addition
NAME			62 NAME		<u>es</u>
STREET ADDRESS			63 STREET ADDRESS		6/17/97
CITY-ST-ZIP			64 City-St-ZiP		6/1/17/1

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 cath; 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. 904-636-

SIGNATURE: