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

PROFIT



FLORIDA DEPARTMENT OF STATE

	UAL REPORT 1996	Secreta	B. Mortham ary of State CORPORATIONS		
DOCU 1. Corporation	MENT # P9500	00097328 (5)			
JTI, IN	C. "				
1 .	e of Business	Mailing Address		i innited (in intit bilit belit) deliti	antii naiin (aili laaka (iliin ilka) lait iaak
14246 THACI LARGO FL 3		14246 THACHER AVENUI LARGO FL 34644	•		
				3. Date Incorporated or Qualified 12/26/1995	3a. Date of Last Report
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number 65-0640962	Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	Not Applicable \$8.75 Additional
City & Stat	le	City & State		Election Campaign Financing	Fee Required
23		28		Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30	8. This corporation has liability for Florida Statutes	intangible tax under s 199.032,
	9. Name and Address of Curr			10. Name and Address of New 8	
14246 T	REW, GREGORY HACHER AVENUE FL 34644		81 Name 82 Street /	Address (P.O. Box Number is Not Acceptat	(e)c
	•		84 City		FL 85 Zip Code
11. Pursuant or registe	to the provisions of Sections 607.05 red agent, or both, in the State of Fic ith, and accept the obligations of, Se	02 and 607.1508, Florida Statutes orlda. Such change was authori ze	s, the above-named co d by the corporation's	rporation submits this statement for the pu board of directors. I hereby accept the app	rpose of changing its registered office ontiment as registered agent. I am
SIGNATURE	im, and accept the obligations of, Se	ction 607.0505, Florida Statutes.			~ 5
12,	Signature, typed or printed name of registered age OFFICERS A	int and the It applicable. (NOTI ND DIRECTORS	E: Registered Ager I signature ro	equired when reinstating! ADDITIONS/CHANGES TO OFF	DATE
THE		DELETE	1 1 1171 £	President	Change Chadilian
NAME			1.2 NAME	GREGORY PAPANDREW 14246 THACHER AVEN	
STREET ADDRESS CITY-ST-ZIP			1.3 STREET ADDRESS	14246 THACKER HVER	VUL
TITLE		[7] DELETE	2 1 TITLE	LARGO FL 34644 Vice President	Change F Addition
NAME			2.2 NAME	TACKIE PAPANDREW	Ondings / Notified
STREET ADDRESS			2.3 STREET ADDRESS	14246 THACHER APE	
CITY-ST-ZIP TITLE		DELETE	2.4 CHY-ST-ZIP	NIKEU FL DYETY	PM
NAME		L) better	3.1 TITLE 3.2 NAME	SURRY, MY	Ohange Addition
STREET ADDRESS			3.3. STREET ADDRESS	DAUGHTER DIA This	1-N2/
CITY-SI-ZIP			3.4 CHY-ST-ZIP	1103	
MILE		☐ DELETE	4 1 TITLE		Chenge Addition
NAME			4.2 NAME		
STREET ADORESS			4.3 STREET ADDRESS	50000X e	18 245
CITY-ST-ZIP TITLE		DELETE:	4.4 CiTy - ST - ZiP	****200.00	
NAME		EJ percit	5. 1 TITLE 5.2 NAME		Change Addition
STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS	<i>(</i>	
C(TY - ST - 7)P			5.4 CITY-ST-Z-P		1
TITLE		DELETE	6. 1 †∉TLE		Change Addytion
NAME			6.2 NAME	M o	
STREET ADDRESS			6.3 STREET ADDRESS	(AH)	(1)

CHY-SI-7/P

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)th, Florida Soutes. 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 II made under cath, that I am an officer or director of the conversion 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 15 if changind, or on an attachment with an address.

SIGNATURE AND TYPENOR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

26AP196 813-583-7193

CR2E034 (12/95)