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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996 DIVISION OF CORPORATIONS					
1. Corporation	MENT # P9500(A DOBES, INC.	0097906 (8)		I 1884/884 JIR 1818; BINI 88111 88111 88111 8	NA 1810 1880 2800 2800 8800 800 1880
Principal Place of Business		Maiang Address			
11579 MANATEE TERRACE LAKE WORTH FL 33467		11579 MANATEE TERRACE			
LAKE WORTH	FL 33467	LAKE WORTH FL 33467			D
				3. Date Incorporated or Qualified 12/22/1995	Date of Last Report
2. Principal Place of Business		2a. Mailing Address		4. FE: Number	Applied For
21		Suita Ant # elc		65-0628362	Not Applicable
Suite, Apt. #, etc.		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23	Country	28	Country	Trust Fund Contribution	Added to Fees
Zip 24 .	Country 25	7(p	Country 30	8. This corporation has liability for intang	
-7]	9. Name and Address of Currer		1931	10. Name and Address of New Regis	tered Agent
			81 Name		
11579 MANATEE TERRACE LAKÉ WORTH FL 33467			82 Street Address (P.O. Box Number is Not Acceptable)		
			83		
• .			84 City		FL 85 Zip Code
11. Pursuant t	to the provisions of Sections 607.0502	2 and 607.1508. Florida Statute	s, the above-named corpo	ration submits this statement for the purpose and of directors. Thereby accept the appointment	of changing its registered office ent as registered agent. I am
familiar wit	th, and accept the obligations of, Sect	tion 607.0505, Florida Statutes.	or try the corporation of the	i d ey di dotto e i i i i i e eppe i i i e eppe i i i e	,
SIGNATURE	Signature: typed or printed nature of registeres: agent	Land thich as niceon in 1901	E. Flage-tereo Agent signature require	c when repostation?	DATE.
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12
TITLE	D	☐ DELETÉ	1 1 TITEF		Change Addition
NAME	WILLIAMS, SALLY R 11579 MANATEE TERRACE		1.2 NAME		
STREET ADDRESS	LAKE WORTH FL 33467		13 STREET ADDRESS		
CITY-ST-ZIP TITLE	Date from the costor	[T] DELETE	2 : 7"[LE		Change Addition
NAME	WILLIAMS, CHARLES C		2.2 NAME		
STREET ADDRESS	11579 MANATEE TERRACE		2.3 STREET ADDRESS		
CITY-ST-ZIP	LAKE WORTH FL 33467		2.4 C/TY+ST-7/P		···
TATLE		☐ DECETE	3 1 TiTLF		Change Addition
NAME NAME			3.2 NAME		
STREET ADDRESS CITY-ST-ZIP			3.3 STREET ADDRESS 3.4 CITY STAZIP		
TIFLE		DELETE	4 1 THILE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-SI-ZIP		DELETE	4.4 CITY ST-7IP	A L	Change Addition
TITLE NAME		L Detere	5 1 TITLE 52 NAME -	100001816	
STREET ADDRESS			5.3 STREET ADDRESS	100001816 -05/10/9601012	015
CITY-SI-ZIP			5 4 CITY - ST - 7IP	***200.00	
TITLE		DELETE	6 1 TITLE		Change Addition
NAME		!	6.2 NAME		ング、ハ
			6.3 STREET ADDRESS		9
CITY - ST - ZIP	1		6.4 CITY - ST- ZIP		

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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 arimust 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 attayhment with an address

SIGNATURE:

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/96 Destroe Prior e #