## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION annual report



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1997 DOCUMENT # P96000004202 (3)

Principal Prace	e of Business	Mailing Address			
538 - 12TH ST. WEST BRADENTON FL 34206		538 - 12TH ST. WEST Bradenton Fl 34205-7411			
					3. Date Incorporated or Qualified 3a. Date of Last Report 01/12/1996
	lace of Business	2a. Mailing Address			4. FEI Number Applied For Not Applied For
Suite, Apr	# 400	Suite, Apt. #, etc.			\$9.7E 4.45
22		27			5. Certificate of Status Desired Fee Required
City & State	(	City & State			6. Election Campaign Financing \$5.00 May Be
[ <b>23</b> ] Zip	Country	28 Zip	Country	,	Trust Fund Contribution Added to Fees
24	25	h,		,	8. This corporation has liability for intangible tax under s. 199.032, Flonda Statutes ☐ Yes ☐ No
	g, Name and Address of Currer	· · · · · · · · · · · · · · ·			10. Name and Address of New Registered Agent
	FFENBACH, E. JON		81	Name	
	- 12TH ST. WEST		82	Street Ad	dress (P.O. Box Number is Not Acceptable)
BHA	DENTON FL 34205		83		
			64	City	FL 85 Zip Code
SIGNATURE 12.	en familiar with, and accept the oblig depress one to parethree depoted as OFFICERS AN		Hogislered Age 13.	ent signature rec	Quired when reinsizing)  DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  SECURIARY  Change Addition
NAMI STREET ATORESS CITY ST. ZIE:			1.2 NAME 1.3 STREET 1.4 CITY - S	I ADDRESS	E. Jon Weiffenbach 538 124 St. W. Bradenton, Fl 34205
THEF	.,	☐ DELETE	21 TITLE	,, ,,,	Change Addition
NAME			22 NAME		
STREET ADDRESS			23 STREET	1	
CHY ST-ZEC		DELETE	2. 4 C(1)Y - 3.1 TITLE	ST- ZIP	Change Addition
E335			3.2 NAME		Last Change Last Notation
STREE ADDRESS			3 3 STREET	I ADDRESS	
045 ST 7P			3 4. C(TY-	SI-ZIP	
301.4		[_] DELETE	4.1 TITLE		L_  Change L_  Addition
NAME STREET ADDRESS			4. 2 NAME	I ADDRESS	
CHY SI-71			4.4 City - 5		
10 til		DELETE	5.1 TITLE		Change Addition
NAME			52 NAME		
STREET ADDRESS.			1	T ADDRESS	
COLY SI - 76 THU		DELETE	5.4 CHY-5 6.1 TITLE	ST - ZIP	☐ Change ☐ Addition
NAMe		En pecit	62 NAME		T Arango T Monay
STREET ACTORINS				T ADDRESS	
Offy-ST-Zif			6.4 CITY - S		
informatio Lam arco	or led cated on this annual report or :	supplemental annual report is tru or the receiver or trustee empowe	red to exec	urate and th	ted in Section 119.07(3)(i), Florida Statutes. I further certify that the hat my signature shall have the same legal effect as if made under oath. If port as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

**FILED** 

Mar 21 1997 8:00am

Secretary of State