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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P96000008148

FILED Mar 11 1997 8:00am Secretary of State

SGI), Inc.							
Procession en Husiness 4047 Okarchober Blvd. Suite 122, 123 Habitat Center West Poly Brack FL 33400		Mailing Address	27 Don Mo Bec	161 RAGE) CA., FL 33401	3. Date Incorporated or Qualified	3a. Date	of Last F	Report
2, Principal F	"Report Business	2a. Mailing Addres	5		4. FEI Number	L	A	pplied For
21 Suite Acc	B adv	26	<u> </u>		65-0638969			lot Applicable
22		27			5. Certificate of Status Desired			Additional lequired
Ctv 8.5 a	1	City & State			6. Election Campaign Financing			May Be
23 /iji	Country	28	Cou	intry	Trust Fund Contribution	interpuble to		to Fees
24	25 29 30		— — ·	,	8. This corporation has liability for intang-ble tax under s 199.032, Florida Statutes Yes No			
	9. Name and Address of Curren		····		10. Name and Address of New R	gistered Ag	ent	
Col	ok Giragony D.			81 Name				
Not	othbodae Conter &	uite 900		82 Street Ad	ddress (P.O. Box Number is Not Accepta	ble)		
7	ok, Gregory D. 1thboided Center, S D. Box 3795 of Palm Beach, 1	• • •		83				
7.0	1.00373	F 32412	,	93				
· wa	st talm Deaen,	C COTTOR		84 City			85 Zip	Code
44 Diec. 33	to the plan evens of Spot one 607 650	2 and 607 1508 Florida	Statuter the al	DOUG DAMON O	orporation submits this statement for the	TL	1	ito conictore d
office or i	registered agent, or both, in the State.	of Florida, Such change	was authorized	d by the corpo	ration's board of directors. I hereby acce	pt the appoir	itment as	registered
	air' fan shar with land accept the obliga	all ons or Section 607.05	us, Florida Siai	utes.				
SIGNATURI	The second control of the second seco	claid title 1 applicable	(NOTE Registere:	d Agent signature re	gured when reinstating)	CIATE:		
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OFFI	CERS AND D	RECTO	RS IN 12
1 11 5	President	DELE	TE 11 TI	TLE	Vica-Provident		Change	Addition
NAM:	Don G. Stidham 18790 SE. River		1 2 NA	AME C	Patricia N. Stidhe.	u		
SIRR NORMA	18790 SE. RIVE	- Ridge Rd	135	REET ADDRESS	18790 SE. River Ri	dea Rd		
15 y 1 75	Terresta FL 3	<u> </u>		TY-ST-ZIP	Taquesta FL 334	469		
1:11	. 6	☐ DELE	TE 21 TI	rle]	D	. ,	Change	Addition
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DOSE]	DELET		Į		L	_ Change	Addition
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1 1 E		DELE		·	4000021 -03/12/97010 ***165.00	155	Et ange	Addition
NAME			6 2 N/	AME.	-03/12/97010	19000	3 -	
s gerrande (!		6351	REET ADDRESS	***165.00			
<u>. 17 32 30</u>				TY-ST-ZIP				
14. Looners:	 i.e. If by that the information supplied is undoubted on this appear consist of a 	with this fring does not	qualify for the	exemption sta	ted in Section 119.07(3)(i), Florida Statute hat my signature shall have the same leg	s I further o	ortify that	the
1 (0.1) (2.1) (2.1)	clear or directer of the corporation or	the receiver or trustee e	mpowered to e	execute this rep	port as required by Chapter 607. Florida:	Statutes; and	that my i	nan Sina ina
at terms	in Black 12 or Black 12 if changes, or	on an attachment with a	an address.)				ાખુત
SIGNAT	TURE:	N. ≤	Sitt		2/17/97 5	41-12	4_1	008
VIVIIA1	SIGNATURE AND TYPED OR	PRINTED NAME OF SIGNING O	FFICER OR DIRECT	OR	Date	Dayti	ne Pricine #	<u>, u</u>