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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED May 08 1997 8:00am Secretary of State

DOCUMENT #	P96000010944	(2)

Principal Place	STREET	Mailing Address 440-B WALKER STREET				
HOLLY HILL FL	. 32117	HOLLY HILL FL 32117-2653		3. Date Incorporated or Qualified	3a. Date of Last F	Report
				02/01/1996	N/A	
	lace of Business	2a. Mailing Address		4. FEI Number		pplied For
Suito, Apt	WALKER Street	26 140 7th Suite, Apt. #, etc.	Street	59-3369658	- ¢0.7E	ot Applicable Additional
22	π, υ	27		5, Certificate of Status Desired		equired
City & State	1	City & State		6. Election Campaign Financing	\$5.00	May Be
23 Holly	Hill FL	28 Holly Hill	FL	Trust Fund Contribution		to Fees
a 70 321	Hill FL Country 17 25 USA 9 Name and Address of Curren	Zip 29 32117 - 3710	Country 30 USA	8. This corporation has liability for	r intangible tax under t Yes 🔲 No	s 1 9 9.032,
24 521	9. Name and Address of Curren		w usn	Florida Statutes 10. Name and Address of New R		
SEAL	MAN, CARL E		81 Name Ca	eamon Carl E.		
	B WALKER STREET		82 Street Addr	ress (P.O. Box Number is Not Accepta	ible)	
HOL	LY HILL FL 32117		140	7th Street	·	
			83			
			84 City Holly	1154	FL 85 Zip	Code
				H-111		רוגי
11. Parsonett	to the provisions of Sections 607,050	2 and 607, 1508. Florida Statute	 s. the above-named cdrp 	poration submits this statement for the		its registered
office or re	enistered agent, or both, in the State	of Fiorida. Such change was a	uthorized by the corporat	poration submits this statement for the tion's board of directors. I hereby acce	purpose of changing	its registered registered
office or re agent. La	to the provisions of Sections 607.050: egistered agent, or both, in the State in familiar with, and accept the obliga	of Fiorida. Such change was a	uthorized by the corporat	poration submits this statement for the tion's board of directors. I hereby acce	purpose of changing	its registered s registered
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I the range of the composition 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 12 or Block 12 or no an appearance with an address.

SIGNATURE