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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P96000012339 (3)

4TH PROP., INC.

FILED Apr 07 1997 8:00am Secretary of State



Fruit is a facility	nce of Business	Mailing Address				TIL QQIJI QQIJI PBIQI	BIBLE	
11633 BEA		11633 BEACH BLVD.						
	ALLE FL 32216	2246-6604						
					3. Date Incorporated or Qu 02/08/1996	ualified 3a.	Date of Last F	lepart
2. Principal	Place of Business	2a. Mailing Address			4. EENumber-2/ m	dM	A	oplied For
1		26			27-27620	<i>t</i> /	N(ot Applicabl
Suite, Ap		Su _i le, Apt. #, etc.			5. Certificate of Status Des	ired 🔲		Additional equired
City & St	ate	City & State			6. Election Campaign Fina Trust Fund Contribution	ncing		May Be to Fees
Zp	Country	Zip	Count	try	8. This corporation has lial			. 199.032,
4	25	29	30		Florida Statutes	Yes		
	Name and Address of Cur	rent Registered Agent		d I Name	10. Name and Address of	New Registere	d Agent	
	SAFER, ELIOT J		8	11 Name				
	3974 WOODCOCK DRIVE		8	Street Ad	dress (P.O. Box Number is Not A	cceptable)		
	SUITE 100		-	13	***************************************			· · · · · · · · · · · · · · · · · · ·
•	JACKSONVILLE FL 32207		٦	8				
		•	8	4 City			85 Zip	Code
	nt to the provisions of Sections 607.6 or registured agent, or both, in the St fam familiar with, and accept the ob					<u> </u>		
SIGNATUR	<u> </u>							
	Signer to depend or mined their of registered			Agent signature req	uired when reinstating)	DATE	ND DIRECTOR	2S IN 12
		AND DIRECTORS	13.		ADDITIONS/CHANGES T			
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To note by certify that the information supplied with this tilling does not quality for the exemption stated in Section 119.07(3)(t), Florida Statutes. 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 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 attachment with an address.

SIGNATURE

CHATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-Pres

4-1-97 904-645-3007