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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State ►

DIVISION OF CORPORATIONS

DOCUMENT # P96000016541 (0)

ALEXUS CORPORATION

FILED Jun 19 1997 8:00am Secretary of State

Principal Place of Business	Mailing Address		- L CAMPINENO DIN LOUIS MINUL GRAND BRING ROND MINUS MINUS MINUS BICAN BERNO BION (1804 1800)
133 34TH ST BLANDO FL 32776	4133 341H-87 ORLANDO FL 32811-6475	DIL	
4300 B L.B. Mc.	Leod Rd	10RP	

ORLANDO FL	32776 	ORLANDO FL 32811-6475	AL	<u> </u>		
	B L.B. McLeoo to, 71.32811		CORO	Ail 70:	3. Date Incorporated or Qualified 02/13/1996	3a. Date of Last Report
2. Principal P	lace of Business	26. Maily Address 122 26. EUST 5 F/ Suite, Apt. #, etc.	SNORE	EBR A.	4. FEI Number	Applied For
21		26 EUSTIS, FL	327	26	59-3364959	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, efc.			5. Certificate of Status Desired	S8.75 Additional Fee Required
City & State	е	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Countr	у	8. This corporation has liability for	intangible tax under s. 199.032,
24	25		30			Yes No
	9. Name and Address of Curre	nt Registered Agent		7	10. Name and Address of New Re	
2957 SUIT	.VO, CARMINE M 7 W STATE RD 434 TE 400 GWOOD FL 32779		82		Le How, Roger Y. ess (P.O. Box Number is Not Acceptable La Keshore Dr.	A-5
	1		84	KU	stis,	FL 85 Zip Code 3272 6
11. Pursuant office or r agent. I a	to the provisions of Sections 607.05(egiptered agont, of both, in the State of familiar with, and accept the joing	Z	Ka	ee Y. I	oration submits this statement for the points board of directors. I hereby accepted the points of th	urpose of changing its registered at the appointment as registered • •
12. Y	gnature upod or or floor prise of egistrology	on and tillorf applicable (NOTE ID DIRECTORS	: Rogistered Ag	ent signature require	ed when reinstating) ADDITIONS/CHANGES TO OFFICE	DMIL
TITLE	D OFFICERS AN	DELETE	1.1 TITLE	つ	resident/Director	Change Addition
NAME	HAZELTON, ROGER Y	Carlo Dicerta	1,2 NAME	1	resident for which	E vidende
STREET ADDRESS	1111 LAKESHORE DR A-5			1 ADDRESS		
CITY-ST-ZIP	EUSTIS FL 32776		1.4 CITY-	~\\		32726
TITLE		DELETE	2.1 TITLE	31.01		Change Addition
NAME			2.2 NAME]		
STREET ADDRESS		·		I ADDRESS		
CITY-ST-ZIP			2. 4 CITY-			4
TITLE		DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAME	Ì		
STREET ADDRESS			3.3 STREE	1 ADDRESS		
CITY-ST-ZIP			3.4. CITY -	ST-ZIP		
TITLE		DELETE	4.1 TITLE			Change Addition
NAME	n		4. 2 NAME			
STREET ADDRESS			4.3 STREE	T ADDRESS		•
CITY-ST-ZIP			4.4 CITY-	ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE			☐ Channe ☐ Addition
NAME			5.2 NAME			TK. Z
STREET ADDRESS			5.3 STREE	1 ADDRESS		V 6
CITY-ST-ZIP	·		5.4 CITY-	\$1-7IP		
TITLE	-	☐ DELETE	6.1 TIPLE			Change Addition
NAME .			6.2 NAME	İ	20000221 -06/20/970100	7742
STREET ADDRESS			63 STREE	1 ADDRESS		J3D09
CITY-ST-7IP			6.4 CITY-1	ST-7IP	***165.00	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 eath, 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 and Block 13 to chapted, or on an attackment with an address.

CNATUDEN TO SHOW WALLS HE WILL S. S.

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