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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000017929 (6)

FILED May 20 1997 8:00am Secretary of State

Principal Place of Business Mailing Address										
Principal Place of Business 5800 OVERSEAS HWY #35 MAROTHON FL 33050		5800 OVERSEAS HWY #35 MAROTHON FL 33050-2719					•>>>>			
				:		3. Date Incorporated or Qualified 02/26/1996	3a. Date o	of Last Re	eport L	
	lace of Business	2a. Mailing	Address			4. FEI Number	シフ		plied For	
Sulte, Apt.	#, etc.	26 Suite, A	pt. #, etc.			100-04411	o'.		l Applicable Idditional	
22		27				Certificate of Status Desired	U *	Fee Re		
City & State		City & S	tate			6. Election Campaign Financing	F	\$5.00	May Be	
Zip	Country	28 Zip	Т	Country		Trust Fund Contribution 8. This corporation has liability for i		Added to		
24	25	29		30		Florida Statutes	Yes 🗌 N	lo	199.032,	
	9, Name and Address of Curre	nt Registered Ag	ent	81	Name	10, Name and Address of New Re	gistered Age	nt		
	OY, ŁAURA) OVERSEAS HWY #35				<u>.</u>				· · · · · · · · · · · · · · · · · · ·	
	OTHON FL 33050			82	Street Add	dress (P.O. Box Number is Not Acceptab	ile)			
•••				83	·					
				84	City			5 Zip (Code	
44 Purcuent	a the provisions of Spetimes 607 00.	03 and 602 st 09	Elevide Statute	11.0 01.0	nonad on	the state of the s				
office or re	egistered agent, or both, in the State m familiar with, and accept the oblic	e of Florida, Such	change was a	s, the above juthorized by	y the corpora	rporation submits this statement for the p ation's board of directors. I hereby accep	orpose of cha at the appoint	anging its ment as i	s registered registered	
añaur rai	m ramınar wirri, and accept the obliç	Javons di, 50ction	007.0005, FIO	ilida Statutes	S.					
CICNIATUDE				i						
SIGNATURE	Signature, typed or printed name of registered ag		, (NOIL	Registered Age	nit signaturo reqi	virod when reinstating)	DATE			
12.	OF LICERS AN	ND DIRECTORS		13.	nit signature requ	uired when reinstating) ADDITIONS/CHANGES TO OFFIC	ERS AND DIF			
12.	President	ND DIRECTORS	DELETE	18. 1.1 Tale	nnt signeture rc qu		ERS AND DIF		S IN 12	
12. TITLE NAME	Prespient William Malay	ND DIRECTORS		13. 1.1 T-1 LE 1.2 NAME.			ERS AND DIF			
12. TITLE NAME STREET ADDRESS	President William Maluy 8085 Bonda Drive	ND DIRECTORS		18. 1.1 Tale	ADORESS		ERS AND DIF			
12. TITLE NAME STREET ADDRESS	Prespient William Malay	NO DIRECTORS 【 ・ っちひ		13. 1.1 T-1LE 1.2 NAME 1.3 STRECT	ADORESS		ERS AND DIF			
112. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	President William Maluy 8085 Bonda Drive	NO DIRECTORS 【 ・ っちひ	DELFTE	13. 1.1 T-1LE 1.2 NAME 1.3 STRECT 1.4 CHY-S	ADORESS		ERS AND DIF	Change	Addition	
112. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	President William Maluy 8085 Bonda Drive	NO DIRECTORS 【 ・ っちひ	DELFTE	18. 1. THE 1. NAME 1. STREET 1. CHY-S 2. THEE 22 NAME 2. STREET	ADDRESS 31 - ZIP ADDRESS		ERS AND DIF	Change	Addition	
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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 tam 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.