## 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 # P96000021941 (5)

<del>5429-Delous Dri</del> ve	<del>5420-CELQUO DRI</del> VE		
H <del>oudhay FL-8400</del> 9	HOLIDAY FL 34690-6842-		
Principal Place of Business	Mailing Address		

## **FILED** Apr 09 1997 8:00am Secretary of State

Principal Place	of Business	Mailing Address			ARAN BERAN ODNING TIDDAN INDING RONNIN DIABRI DABI INDI
5429-DELOUS T HOLIDAY FL S4	MIVE	5400 CELQUE DRIVE HOLIDAY FL 34600 8842			
				3. Date Incorporated or Qua 03/06/1996	alified 3a. Date of Last Report
2. Principal Pa 21 <b>73</b> 5	Dodecane	Se Bly 26 1623 N. 1	tighland Av	e 1. FEL Number 3360	Applied For Not Applicable
Suite, Apt	140	Suite, Apt. #, etc.		6. Certificate of Status Desir	ed   \$8.75 Additional Fee Required
City & State	pon Spring	- City & State	ler FL	6. Election Campaign Finance Trust Fund Contribution	cing \$5.00 May Be Added to Fees
24 346	25 Country	29 34615	Country 30	8. This corporation has liable Florida Statutes	lity for intangible tax under s. 199.032,
24 0 10		of Current Registered Agent	[30]	10. Name and Address of N	
MYE	RS. TERRY L		81 Name	2 icharcal V	amcil
5423	CELCUS DRIVE		82 Street A	Strang (B.O. Box Number die Not 40	WWSI C
HOL	DAY-FL 34689		83 Street A	623 N Hg/	itanac Ave
		1	B4 City	leaninter	- El 85 2013 15
11. Pursuant t	o the provisions of Scolons egistere gent, oy both, in managery with, and accept	s 07,0502 and 607,1508, Florida Sta	tutes, the above-named of	perporation submits this statement for	or the purpose of changing its registered y accept the appointment as registered
agent. Lar	m langing with, and iccert	de opligations of, Section 601/0505.	Florida Statutes.	Variabile O -ac	L 2 2 C7
SIGNATURE	VI/W/ 11	1/1/1/1///	_KICKARA	Karasik, Pres.	1-20-9+
12.	re, type or printed paye of o	CERS AND DIRECTORS	IOIE Registered Agent signature r		O OFFICERS AND DIRECTORS IN 12
1IILE	7 0111	DELETE	1.1 TITLE	Pres., Treas.	Change Addition
NAME			1.2 NAME	Richard Kara	SIK.
STREET ADDRESS			1.3 STREET ADDRESS	1623 N. 719/10	ind Ave.
CITY - ST - ZiP			1.4 CITY-ST-ZIP	Clearwater 1	92 34615
THEF		DELETE	2.1 TITLE	V.P. Sec.	☐ Change ★ Addition
NAME			2.2 NAME		. Dx
STREET ADDRESS			2.3 STREET ADDRESS	2009 Powder	hom ur
CITY - ST - ZIF			2. 4 CITY - ST - ZIP	Cleanwater	horn Dr. PL 34615
THE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3 2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - ST - ZIP			3.4. CITY - ST - ZIP		
THEF	THE STATE OF THE S	☐ DELETE	4.5 TITLE	<del></del>	☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
City - St - ZIP			4.4 CITY - ST - ZIP		
TiTté		☐ DELETE	51 TIFLE		Change Addition
NAME			52 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
C(TY+S1+ZIP			5 4 CITY-ST-ZIP		
TITLE		☐ DELETE	61 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST ZIP			6.4 CITY - ST - ZIP		

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 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:

MONTORVLEWIS, SEC. 1-20-97 (813)443-7511