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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P96000022561 (0)

BETTOR, INC.

JACKSONVILLE FL 32277

Princ	ipa' Pl	ace of	Business	
3965	BESS	ROAD		

Mailing Address

3985 BESS ROAD JACKSONVILLE FL 32277-2117

FILED May 09 1997 8:00am Secretary of State

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							0-0		coord
					3. Date Inc	orporated or Qualified	38. Da	ite of Last F	epor
					03/13/	1996			
2. Principal Pla	ce of Business	2a. Mailing Add	dress		4. FEI Num	per 1	_	A	plied For
21		26			59	7-33468	96	N	ot Applicable
Suite, Apt. #	, etc.	Suite, Apt	#, etc.				_	\$8.75	Additional
22		27			b. Certifica	te of Status Desired	LJ		quired
City & State		City & State)		6. Election	Campaign Financing		\$5.00	May Be
23		28			N .	nd Contribution	П		may be to Fees
Z(j)	Country	Zip		Country		poration has liability for	r intennible		
24	25	29	30	1 '	Florida S			iax under s ∃ No	. 189.032,
<u></u>	9. Name and Address of C	· · · · · · · · · · · · · · · · · · ·		1		nd Address of New R			
				81 Name		٠ ــــــــــــــــــــــــــــــــــــ		190111	
	vette, orren s				Kenee 1	4 Stamb	au sh		
3965	BESS ROAD			82 Street	Address (PT), Box N	lumber is Not Accepte	ble)		
JACK	SONVILLE FL 32277			· · · ·	4520 Gi	no office	Way		************
^				83		•	•		
				84 City					0-4-
ſ				64 City	Jackson	wille	FL	BS CO	Code
11. Pursuant to	the provisions of Sections 60 gistered agent, or both, in the	7.0502 and 607.1508, Flo	rida Statutes.	the above-name	corporation submits	this statement for the	purpose of	changing i	s registered
office or reg	gistered agent, or both, in the	State of Florida, Such cha	inge was auth	orized by the co	rporation's board of d	irectors. I hereby acce	of the app	ointment as	registered
	lamiliar with, and accept the		7.0505, Florida	a Statutes.					·
SIGNATURE :	Kence I. with	reo agent and tellur applicable.		1				Y/_ 3 /	9 y
12.	· · · · · · · · · · · · · · · · · · ·	S AND DIRECTORS	(NOTE ME		re required when rainstating)		DATE	DIDECTOR	0.161.40
14.				49	ADDITION				IS IN 12
7.7.6			or, ere	13.	ADDITION	IS/CHANGES TO OFFI			
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NAME			DELETE	1.1 THILE 1.2 NAME	Director Rener & 9520 G	President, N	Ice An		
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4. 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 cath; 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: X Leve S. Attantique Rence L. Stambaugh X 4/2/97 X (104) 645-0492