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

PROFIT CORPORATION ANNUAL REPORT

1997



TLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 15 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

, corporatio	MENT # P9600 HOLDING CORP.	0026373 (6)			121 1 210 (2014 1 310) 1214 1 41 4
Principal Place of Business 6603 EAST COLONIAL DRIVE ORLANDO FL 32807		Mailing Address 5603 EAST COLONIAL DRIVE ORLANDO FL 32807-1822			
2. Principal P 21 Sulte, Apt.	lace of Business	2a. Mailing Address 26 Suite Apt #, etc.		3. Date Incorporated or Qualified 3a. 03/22/1996 4. FET Number	Date of Last Report Applied For Not Applicable
City & Stat		City & State		Certificate of Status Desired G. Election Campaign Financing	\$8.75 Additional Fee Required \$5.00 May Be
23 Zip	Country 25	7(p)	Country 30	Trust Fund Contribution 8. This corporation has liability for intrugil Florida Statutes	□ No
2164	9. Name and Address of Cur SAR, MARC GENOVA DRIVE DO FL 32765	rem Registered Agent	81 Name82 Street Ad8384 City	10. Name and Address of New Registers dress (P.O. Box Number is Not Acceptable)	IRE Zin Code
11. Pursuant office or r agent. I a SIGNATURE	to the provisions of Sections 607.0 ogistered agent or both, in the Stam familiar with, and accept the ob-	ligations of, Section 607.0505,	tutes the above-named co is authorized by the corpor Florida Statutes.	orporation submits this statement for the purpose ation's board of directors. I hereby accept the a	_
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP		AND DIFFECTORS DELETE	13. 1.1 TILE 1.2 NAME 1.3 STRE11 ADDRESS 1.4 CITY-S1-7IP	Quired when relinate and DITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12 Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICAO , Th	DELETE	2 1 THE 22 NAME 23 STREET ADDRESS 2 4 CHY-ST-7IP		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DELETE	3 1 1FLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CHY-S1-ZIP		☐ Change ☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CUY-S1-7/P		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CHY-ST-ZIP		[] DETETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST- ZIP		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DELETE	6.1 THE 6.2 NAME 6.3 STREET ADDRESS 6.4 CHY-S1-ZIP		Change Addition

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 signalure 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.