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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000030951 (3)

FILED
May 14 1997 8:00am
Secretary of State

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28 Orlando Figure 1 Country 2 Tip Country 8, 24 3 28 0 25 US A 29 3 28 0 30 US A 10. NARMON MARK T 821 SUN SPRINGS CIRCLE #23 62 Street Address (Part Addre	Trust Fund Contribution Added to Fees This corporation has liability for intangible tax under s. 199.0 Florida Statutes Yes No Name and Address of New Registered Agent O. Box Number is Not Arce vable) FL 85 Zip Cade In submits this statement for the purpose of changing its registered of directors. I hereby accept me appointment as registered.	32.
9, Name and Address of Current Registered Agent 10. NARMON, MARK T 821 SUN SPRINGS CINCLE #23 0RIANDO FL 32625 11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's bagent. Lam familiar with and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE Signature required when 12. OFFICE BY AND DIRECTORS 19.	Florida Statutes Yes No Name and Address of New Registered Agent	7
NARMON MARK T 821 SUN SPRINGS CIRCLE #23 62 Street Address (P 83 B4 CU 84 CU 85 Street Address (P 85 Street Address (P 86 Street Address (P 87 Street Address (P 88 Street Address (P 89 Street Address (P 80 Street Addres	P.O. Box Number is Not Arceptable) FL 85 Zip Code in submits this statement for the purpose of changing its registed acceptant appointment as registed.	tered ared
SIGNATURE Signature typed or printed name of registered agen; and the dispellcable (NOTE Registered Agent signature required when 12. OFFICE BY AND DIRECTORS 13.	n submits this statement for the purpose of changing its regis locard of directors. I hereby accept the appointment as registe	tered
12. OFFICEBS AND DIRECTORS 13.	reinstating)	
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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 807. Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with a profiles.

SIGNATURE AND TYPED OF PHINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE

429-97

407-898-5900 Dayting From # 68 h 205

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