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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 07 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000032717 (6)

SIGNATURE:

MAHGAH	IET L. ULIUR, P.A.							
Principal Place	of Business	Mailing Addre	ess				OR FINAN FIREIT FERREN HABAN DERN HERK	
1609 BANNING TAVARES FL 32			1609 BANNING BEACH RD TAVARES FL 32778-2024			·		
					· · · · · · · · · · · · · · · · · · ·	04/16/1996	Date of Last Report	
2. Principal Pli 21	ace of Business	28. Mailing Ad	28. Mailing Address			4. FEI Number 59 - 3375397	Applied For Not Applicable	
Suite Apt. (#, etc	Suite, Apt	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State)	·	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Ζιρ 24	Country 25	Zip 29	30	Country	/	8. This corporation has liability for intan		
	9. Name and Address of Cu	rrent Registered Ager	ıt			10. Name and Address of New Registe	ered Agent	
TARA	A FINANCIAL SERVICES, INC).		81	Name			
489 W MINNEHAHA AVE				82	Street Add	Address (P.O. Box Number is Not Acceptable)		
CLE	RMONT FL 34711			83	<u></u>			
				84	City		FL 85 Zip Code	
11. Pursuant (office or re agent. I ar	o the provisions of Sections 607 egistered agent, or both, in the S n familiar with, and accept the o	.0502 and 607.1508, FI state of Florida Such ch bligations of, Section 6	orida Statutes, nange was aut 07.0505, Floric	the abov horized by la Statute	e-named corp the corpora s.	poration submits this statement for the purportion's board of directors. I hereby accept the	ose of changing its registered appointment as registered	
SIGNATURE	Signature, typoid or printed name of registers	d agest and bits of applicable	/NOTE D	topictored An	net giornaturo roqui	red when reinstating) Di	ATE	
12.		AND DIRECTORS	(110.27)	13.	or of marches requi	ADDITIONS/CHANGES TO OFFICERS		
THLE	0		DELETE	1.1 TITLE			Change Addition	
NAME	MAIDMIST L.	Blok		1.2 NAME			-	
\$TREET ADDRESS	MAIGHT L. 235 LAKENEW UMATILLA F	st		1.3 STREET	ADDRESS			
CHY ST-ZIP	UMATILLA F	4 32784		1.4 CfTY- 9	ST-ZIP			
DILE			DELETE	21 TITLE			Change Addition	
NAME				22 NAME				
STREET ADDRESS				23 STREET	ADDRESS			
CITY - ST - ZIP			2 4 CITY-	ST-ZIP	·····			
TOTALE		Ц	DELETE	31 TITLE			Change Addition	
NAME			i	3.2 NAME				
STREET ADDRESS			:	3.3 STREET	1			
CITY - ST - ZIP			DELETE	3.4. CITY-1 4.1 TITLE	ST-ZIP		Change Addition	
TITLE			DECE IE.	4.1 111£E 4.2 NAME			Change L Addition	
STREET ADDRESS				4.2 NOTHE	ADDRESS			
CITY - ST-ZIP				4.4 CITY-S	1			
TITLE			DELETE	5.1 TITLE	11.71		☐ Change ☐ Addition	
NAME				5.2 NAME			•	
STREET ADDRESS			;	53 STREET	ADDRESS			
CITY+ST-ZIP				5.4 CITY-5	1			
TITLE			DELETE	6.1 TITLE			Change Addition	
NAME				62 NAME				
STREET ADDRESS				6.3 STREET	ADDRESS			
CITY - ST - ZIF				6.4 CITY-5				
information	n indicated on this annual report	or supplemental annua	il report is true	and acco	urate and tha	d in Section 119.07(3)(i), Florida Statutes. I fit t my signature shall have the same legal effe	ect as if made under oath, that	
t am an of appears in	ficer or director of the corporation Block 12 or Block 13 if change	in or the receiver or tru: d, or on an attachment	stee empowere with an addre	ed to exec SS.	cute this repo	rt as required by Chapter 607, Florida Statut	es; and that my name	

BEDOT L. CINK 4 /28/97 352 669 7979