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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DE PARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

	.D COURT										
							 Date Incorporated or Qualified 04/11/1996 		Date of L	ast Re	-11-96
⊢ , `	lace of Business	28. Mailing Address					4. FEI Number			Apı	plied For
21 Sulte, Apt. #, etc.		Suite Ant # etc	26 Suite, Apt. #, etc.				59-3374403				t Applicable
22		t1	27			1	5. Certificate of Status Desired				dditional quired
City & State		City & State				6. Election Campaign Financing			·	May Be	
23		28				Trust Fund Contribution				o Fees	
Zip	Country	Ζφ 1111	F1	Country			3. This corporation has liability for	_		der s	199.032,
24	9. Name and Address of Curre	29 29 Agent	30	_		14	Florida Statutes D. Name and Address of New I	Yes Register		~	
DBV	SDALE, SCOTT			81	Name		or realistation of the state of	iogioto.	ou rigoin		
	4 MUIRFIELD COURT			82	Ctroot	Address	(P.O. Box Number is Not Accept	nb(n)	 -		
	M HARBOR FL 34685			02	SII 00(7	Audress	(r.o. box taninber is not Accept	able)			
				83							
				84	City				85	Zip C	
	to the provisions of Sections 607.05			ļl	l				FL "		
SIGNATURE	egistered agent, or both, in the Stat m familiar with, and accept the obti Signature types or proced have chicophred a	greut and pile it approache (f	Olf Begisten	d A ge			nen reinstating)	<u>D</u> A	10		
12.	OFFICERS A	ND DIRECTORS	13.			T	ADDITIONS/CHANGES TO OFF	-ICERS	AND DIREC		S IN 12 Addition
NAME	DRYSDALE, SCOTT	L_I MACA	1.21							1-tyc	E HUQUION
STREET ADDRESS	3814 MUIRFIELD COURT				ADDRESS						
CITY-ST-ZIP	PALM HARBOR FL 34685		1,4 (HY-S	I-71P						
TITLE		DECETE	2.1 T	2.1 TITLE					Cha	inge	Addition
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STREET ADDRESS					ADDRESS	j					
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NAME		L bettere	321						[] 016	n ige	L_ /loodibil
STREET ADDRESS					ADDRESS						
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NAME			624	IAME	İ	1					
STREET ADDRESS			635	THEET	ADDRESS						

64 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

FILED

Mar 19 1997 8:00am

Secretary of State