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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Feb 27 1997 8:00am Secretary of State

		Transfer and a contract of the	
DOCUMENT 1. Corporation Name	#	P96000034835	(4

SARASOTA FL SAZES  SARASOTA FL SAZES  DAMSOTA FL	IMD US	A CORP.			
3400 S TAMIANI TRAL. SUITE 203 SARASOTA FL 34239  2. Processed Place of Formous  2. A Maring Address  2. Processed Place of Formous  3. Date incorporated or Oxasted  3. Date of Exemption  Applied Formous  2. Processed Place of Formous  3. Date of Least Report  Applied Formous  3. Date of Least Report  Applied Formous  3. Date of Least Report  Applied Formous  5. Date of Least Report  5.	Principal Plac	e of Business	Mailing Address		
2. Proncipal Place of Surients  2. Molning Address  2. Molning Address  2. Molning Address  3. Fill humber, 65 - 0661115			3400 S TAMIAMI TR		
Solicy April   Received   Solicy   So	<b></b>				
Suit, Ad # close   Suite   Sui		Place of Business	2a. Mailing Addres	S	4. FEI Number Applied For
S. Certificate of Satus peried   S. Certificate   S. Certi	21				
State   Clay & Stat		#, ele		IC.	I h Lennicate of Status Desired I I
Added to Fees   Added to Fee		······································			
Second   Part	23		28		
S. Name and Address of Current Registered Agent  JAENSCH, PETER J 3400 S TAMIAMI TRAIL, SUITE 303 SARASOTA FL 34239  82 Stroot Address (P.O. Box Number is Not Acceptable)  83	Zip	Country	Zip	Country	
JAENSCH, PETER J 3400 S TAMIAMI TRAIL, SUITE 303 SARASOTA FL 34239  11. Pursuant to the provisions of Socions CO7 0002 and 607 1508, Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered cifcus or registered agent, or both, in the State of Florida Socion 607 609, Florida Statutes.  SIGNATURE  12. OF TICE IS AND DIRECTORS  13. ADDITIONSCHANGES TO OFFICERS AND DIRECTORS IN 12  11. Pursuant to the provisions of Socion 607 609, Florida Statutes.  SIGNATURE  12. OF TICE IS AND DIRECTORS  13. ADDITIONSCHANGES TO OFFICERS AND DIRECTORS IN 12  14. TILL  15. TI	24			30	
SARASOTA FL 34239  82 Sirved Address (P.O. Box Number is Not Acceptable)  83 SaraSOTA FL 34239  84 City FL 85 Zip Code  85 Zip Code  86 City FL 85 Zip Code  87 Zip Code  88 Zip Code  89 Zip Code  89 Zip Code  89 Zip Code  80 Z			ent Registered Agent	041	10. Name and Address of New Registered Agent
SARASOTA FL 34239  11. Pursuant to the provisions of Sectors 697 0502 and 607 1508, Florical Statutes. The above-named corporation submits this statement for the purpose of changing list registered agent an inferior wire, and accept the obligations of, Socion 607,605, Florical Statutes.  SIGNATURE  12. OF FICE IS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. In the Image of the International Acceptance of Sectors 607,605, Floridal Statutes.  14. OF FICE IS AND DIRECTORS  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. In the Image of the International Acceptance of Sectors 607,605, Floridal Statutes.  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. In the Image of the International Acceptance of Sectors In the Image of the International Acceptance of Sectors In the Image of Sectors In the Sectors In the Image of Sectors				Name	
11. Pursuant to the provisions of Socions 607-0502 and 607-1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent family and accept the obligations of, Socion 607-0505, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  DIE NAME  SIGNATURE  1.1 TIGE  OFFICERS AND DIRECTORS IN 12.  DIE NAME  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS IN 12.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  NAME  HERMLE, URS P  1.2 TIME  1.2 TIME  1.2 STREET ADDRESS  1.4 CITY-S1-2P  TIME  1.3 STREET ADDRESS  1.4 CITY-S1-2P  1.4 TIME  1.5 TIME  1.				82 Street A	Address (P.O. Box Number is Not Acceptable)
11. Fursuant to the provisions of Socienes 607 0502 and 607 1508, Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered agent to mitted with a mitted with a mitted could be completed souther agent and accept the objections. Socienos 607 0505, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. Target States	SAK	ASOTA FL 34239		82	AND THE RESERVE OF THE PARTY OF
11. Fursion to the provisions of Sections 607.05.02 and 607.15.08, Florida Statutes, the above-named corporation submits this statement for the purcose of changing its registered algorit or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and accept the objection 607.05.05, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  11. Third.  12. OFFICERS AND DIRECTORS IN 12  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. Change   Addition    HERMLE, URS P   12 NAME    13. STREET ADDRESS   576   Khyber Lane    WENICE FL 34293   14. Chr. St. 2P    14. Change   Addition    HERMLE, ILONA E   23 STREET ADDRESS   576   Khyber Lane    WENICE FL 34293   24. Chr. St. 2P    10. DELETE   3 THIRE   Change   Addition    32. NAME   33 STREET ADDRESS    576   Khyber Lane   Change   Addition    37. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  15. STREET ADDRESS   576   Khyber Lane    WENICE FL 34293   14. Chr. St. 2P    10. DELETE   3 THIRE   Change   Addition    33. STREET ADDRESS   576   Khyber Lane    WENICE FL 34293   34. Chr. St. 2P    10. Change   Addition    34. Chr. St. 2P    10. Change   Addition    35. STREET ADDRESS    36. Chr. St. 2P    10. Change   Addition    36. STREET ADDRESS    36. Chr. St. 2P    10. Change   Addition    36. STREET ADDRESS    36. Chr. St. 2P    10. Change   Addition    36. STREET ADDRESS    37. STREET ADDRESS    38. STREET ADDRESS    38. STREET ADDRESS    39. STREET ADDRESS    30. STREET ADDRESS    30				63	
SIRET ADDRESS   STREET ADDRESS   STREE					
SIRET ADDRESS   STREET ADDRESS   STREE	11. Pursuant office or i agent 1 a	to the provisions of Sections 607.05 registered agent, or both, in the Stat im familiar with, and accept the obli	902 and 607.1508, Florida Te of Florida. Such change gations of, Section 607.05	Statutes, the above-named or was authorized by the corporate of Florida Statutes.	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
1.2					
MAME   HERMLE, URS P   12 ANAME   12 ANAME   13 SIREET ADDRESS   576 Khyber   Lane					
NAME	····	- <u></u>			
13 STREET ADDRESS   576 KMyber   Lane			, Ti perc		ALI Unange LI Addition
City - 51-2P					576 Wheel T
Change		· · · · · · · · · · · · · · · · · · ·			576 Knyber Lane
HERMLE, ILONA E	TIME		DELE		X Change Addition
STREET ADDRESS   576 KAYGER LANE   23 STREET ADDRESS   576 Khyber Lane					and change
CHY-S1-2P    VENICE FL 34283	STREET ADDRESS				576 Khyber Lane
THE	CITY - ST - 21P				
STREET ADDRESS	TITLE		DELE		Change Addition
STREET ADDRESS   STRE	NAME			3.2 NAME	
DELETE	STREET ADDRESS			3.3 STREET ADDRESS	
NAME	City - ST- ZIP		7.1		
STREET ADDRESS CHY-ST-2IP  TITLE DELETE S1 TITLE S2 NAME STREET ADDRESS CHY-ST-2IP  TITLE S1 TITLE S1 STREET ADDRESS CHY-ST-2IP S4 CHY-ST-2IP S5 STREET ADDRESS CHY-ST-2IP TITLE DELETE S1 TITLE	TITLE		☐ DELEI	TE 4.1 TITLE	Change Addition
A4 CITY-ST-ZIP	NAME			4. 2 NAME	
TITLE         DELETE         5.1 TITLE         Change         Addition           NAME         5.2 NAME         5.2 NAME         5.3 STREET ADDRESS         5.3 STREET ADDRESS         5.3 STREET ADDRESS         5.4 CITY-ST-ZIP         TITLE         Change         Addition           NAME         6.2 NAME         6.2 NAME         TITLE         Change         Addition           STREET ADDRESS         6.3 STREET ADDRESS         CITY-ST-ZIP         CITY-ST-ZIP         TITLE	STREET ADDRESS			4.3 STREET ADDRESS	
NAME  STREFT ADDRESS  CRTY - ST - ZIP  TITLE  CRAME  STREET ADDRESS  CRTY - ST - ZIP  TITLE  CRAME			Loss		
STREET ADDRESS CRY ST-ZIP TILLE TILL			☐ DELET		L_J Change L_J Addition
CHY-SI-ZIP  TITLE  STREET ADDRESS CHY-SI-ZIP  14. 1 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					
THEF    DELETE   6.1 TITLE   Change   Addition					
NAME STREELADORESS CITY-ST-ZIP  14. 1 do hereby certify that the information supplied with this filling does not qualify to the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the			I DELET		Change Claddlen
STREET ADDRESS City-St-ZIP  14. 1 do hereby certify that the information supplied with this filling does not qualify to the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the			L. DELEI		CI Change CI Addition
City-SI-ZIP  56 City-SI-ZIP  14. I do hereby certify that the information supplied with this filing does not qualify to the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the				L I	
14. I do hereby certify that the information supplied with this filling does not qualify to the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the					
intermation indicated by the account constitute and the control of the party of the party in the	14. I do here!	by certify that the information supplied	ed with this filing does not		ated in Section 119.07(3)(i), Florida Statutes. I further certify that the

information induction of instance on this armost report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under of a rin officer or director of the corporation or the receiver or trustee empowered to execute this report as equired by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an application.

**SIGNATURE:** 

02/22/97

941-366-9841

Daytime Phone #