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PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Feb 18 1997 8:00am

Secretary of State

Daytime Phone #

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Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000042116 (9)

DU-MAR WILLIAMS ENTERPRISES, INC.

Principal Plac	e of Business	3		Mailing Address						- I TO DIVIDADI TID FOLIO OTICI ODIALI DOLIA ODILI ODILI OTICIO PIODI HEBI ILIDIO ELII LODI				
114 SW EYERLY AVE PT ST LUCIE FL 34983				114 SW EYERLY AVE PT ST LUCIE FL 34983-2528										
										3. Date Incorporated or Qualified 05/16/1996	3a. [Date of Las	t Repo	ort
2. Principal F	Place of Busin	ess		2a. Maile	ng Addres	SS				4. FEI Number	,		Appli	ed For
21	4 -1-			26	A					65-0658659				pplicable
Suite, Apt				27	e, Apt. #, e	itc.				6. Certificate of Status Desired		\$8.7 Fee	5 Add Requ	
City & State				City & State						6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip		Coun	try	Zip		<u> </u>	Country	y		8. This corporation has liability for in		e tax unde	r s. 19	99.032,
24		25		29		30	L					∐ No		
tani i			ress of Current R	egistered	Agent		61	1 ,	Name	10. Name and Address of New Reg	isterec	Agent	•	
	liams, dua Sw Eyerly						61	Ι'	INSTRU					
PT S					82	,	Street Addre	iress (P.O. Box Number is Not Acceptable)						
							83							
							84		City		Fl	_ '	ір Сос	
11. Pursuant office or agent. La	to the provision to the	ons of Se ont, or bo h, and ac	ctions 607 0502 at th, in the State of facept the obligation	nd 607.150 Florida: Su ns of, Sect	08, Florida ch change tion 607.05	Statutes, was auth 505, Florid	the abov orized by a Statute	e-n y th s.	named corpo he corporatio	oration submits this statement for the pon's board of directors. I hereby accept	rpose o t the ap	of changin pointment	g its re as reς	egistered gistered
SIGNATURE	F7													<u> </u>
12.	Signature, Typeo i		n e al registered agent an OFFICERS AND D		····	(NOTE: Re	gistered Ap	eni i	signature required	d when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE EDG AN	D DIRECT	npe i	NI 12
TITLE	PRESIN			III LOTOTI	DELE	TE	1.1 TITLE			ADDITIONOS CITARIOLES TO CITAL	LINO AIN	Chang		Addition
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NAME	Marin	W W.	WIAMS				2.2 NAME						_	_
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NAME	1						4. 2 NAME					-		
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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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.