PROFIT CORPORATION ANNUAL REPORT 1997			FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS				AND FILED 1997 OCT 20 /M 9: 55 SECRETARY OF STATE				
MULLET	e of Business	NTIONAL, INC	3537 (2)				TĂLLĂĤĂ:				
TAMPA FL 33629 TAMPA FL 33629							DO NOT WRITE IN THIS SPACE				
							3. Date Incorporated or Qualified 05/28/1996		ate of Last F	Report	
	L Street, N.W.	26	Mailing Address Suite, Apt. #, etc.				4. FEI Number 54-1813741		N	pplied For of Applicable Additional	
Sulte	200	27	City & State				 Certificate of Status Desired Election Campaign Financing 		Fee R	Additional lequired May Be	
Washi Zip 20036	ngton, D.C. 200 Country 25 USA	36 28	Zip	Co 30	untry		Trust Fund Contribution Trust Fund Contribution This corporation owes or has parameters Personal Property Tax due June		Added rent year (n	to Fees	
401	ERMAN, JOEL LEE 3 ZELAR STREET IPA FL 33629				83		s (P.O. Box Number is Not Accepta	ble)			
		. .			84 City			FL		Code	
II. Pursuant office or r agent. I a SIGNATURE					bove-named d by the con tutes.		ation submits this statement for the s board of directors. I hereby acce	FL purpose of pt ne app			
SIGNATURE	Signifure, typed or printed name of roy	60) 0502 and 69 by State of Furies the obligatic (sol), intered agent and die if ERS AND DIREC	epplicable (N IORS	DIE Register	bove-named of by the cor tutes.	e required	10	purpose of pt the app DATE	f changing i ointment as	its registered registored	
SIGNATURE	Signifure, typed or printed name of roy	istered agent and tallo if	epplicable (N	DIE Register 13. 1.1 1 1.2 N 1.3 S	bove-named of by the cor tutes.			purpose of pt he app DATE CERS AND 3273 97-01	Changing ointment as 977 DIRECTOI Change 362- 103	Its registered registered RS IN 12 X Addition 137	
SIGNATURE ITLE IAME STREET ADDRESS SITY - ST - ZIP ITLE IAME STREET ADDRESS	Significe Typed of printed raw of top OFFICE SHERMAN, JOEL LEE 4013 ZELAR STREET TAMPA FL 33629 D HARTE, JOHN 4013 ZELAR STREET	istered agent and tallo if	epplicable (N IORS	DIE Register 13. 111 12 M 1.3 S 1.4 C 2.1 T 22 M 23 S	Agent signatur ad Agent signatur ad Agent signatur IIILE IAME ITREFT ADDRESS ITY-ST-ZIP IIILE IAME TREET ADDRESS	e required	when reinstating) ADDITIONS/CHANGES TO OFFIC	purpose of pt he app DATE CERS AND 3273 97-01	Changing ointment as	Its registered registered RS IN 12 IXI Addition J37	
SIGNATURE 12. 11TLE 14ME 14TLE 14ME 14TLE 14	Signure Typed of printed new Policy OFFICE SHERMAN, JOEL LEE 4013 ZELAR STREET TAMPA FL 33629 D HARTE, JOHN	istered agent and tallo if		DTE Register 13. 1.1 1 12 h 1.3 5 1.4 (2.1 T 2.2 h 2.3 5 2.4 1 3.1 T 3.2 h 3.3 5	In the second second second by the contract of by the contract second se	P P V Col	when reinstalling) ADDITIONS/CHANGES TO OFFI 200002 10/22/ *****?5(1, Dermot	DATE DATE CERS AND 327-01	Change	Its registered registered RS IN 12 IXI Addition J37 50, 00	
SIGNATURE 2. ITLE IAME STREET ADDRESS SITY-ST-ZIP ITLE IAME ITLE IAME ITLE IAME ITLE IAME ITLE	Significe Typed of printed row of the OFFICE SHERMAN, JOEL LEE 4013 ZELAR STREET TAMPA FL 33629 D HARTE, JOHN 4013 ZELAR STREET TAMPA FL 33629 D COLL, DERMOT 4013 ZELAR STREET	istered agent and tallo if		DTE Register 13. 1.1 12h 1.3 1.4 2.1 2.1 2.1 2.1 2.1 2.1 2.1 2.1	In the second se	P P V Col	when reinstaling) ADDITIONS/CHANGES TO OFFI 200002 10/22/3 *****75(DATE DATE CERS AND 327-01	Change	Its registered registered RS IN 12 IX Addition 37 137 137 14 137 14 137 14 14 150 10 14 15 15 15 15 15 15 15 15 15 15	
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