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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 28 1997 8:00am

Secretary of State

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Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000049040 (4)

BIRDS TO GO, INC.

T THE STATE OF THE	e of Business	Mailing Address	dress							
38045 COUNTY RD 439 EUSTIS FL 32726		38045 COUNTY PD 439 EUSTIS FL 32736-8512								
					3.	Date Incorporated or Qual	lified	3a. Da	ate of Last	Report
2. Principal Place of Business		2a. Mailing Address				FEI Number				opplied For
Suite, Apt	# atc	26 Suite, Apt. #, etc.				<u> 59- 3385882</u>				lot Applicable
2	#, C(C	27			5.	Certificate of Status Desire	ed			Additional Required
City & Stat	6	City & State			6.	Election Campaign Financ	ina			May Be
3		28			"	Trust Fund Contribution	,,,, ,,			i to Fees
Zip ~n	Country	Zip	Coun	try	8.	This corporation has liabiti	ity for in	itangible	tax under	s. 199.032,
4	25	29	30		<u></u>	Florida Statutes			No	
	9. Name and Address of Curi	ent Registered Agent		N4 N4		. Name and Address of Ne	ew Reg	istered i	Agent	
	SHIRE, LOIS E	•	'	31 Name	,	4				
38045 COUNTY RD 439			1	32 Stree	Address (F	dress (P.O. Box Number is Not Acceptable)				
EUS	TIS FL 32726			33					· · · · · · · · · · · · · · · · · · ·	
			[a	34 City				FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607 1508. Florida Statu	tas the shi)/e-name	d corporatio	on submite this statement for	r the pu		changing	de cogleteres
office or r	egistered agent, or both, in the Sta m familiar with, and accompline ob	te of Florida. Such change was	authorized	by the co	rporation's l	board of directors. I hereby	accept	the app	ointment a	s registered
	m ramiliarzwart, and acceptine ob	ligations or, Section 607.0505, F	iorida Staty	tes.			- (La	07	
つきぐさん しんりょうじつじ	1/1/100 (1.1	# (/ () . A #A A A A A A		1000)~ ~ 7 /	
SIGNATURE.	Son along blood or printed name of registered.	agent and title if applicable. (NO	TF: Registered	16610	sent when	n reinstation)		DATE		
	Septature, lybeid or printed name of registered. OFFICERS A	agent and title if applicable. (NO NDD DIRECTORS	TE Registered	116/0 Agent signatu	re required when		ÖFFICE	DATE RS AND	DIRECTO	RS IN 12
12.						n reinstating) ADDITIONS/CHANGES TO	OFFICE		DIRECTO	
1 2.	OFFICERS A	AND DIRECTORS	13.	E			OFFICE			
12. Hille Name	OFFICERS A	AND DIRECTORS	13. 1 1 TITL 1.2 NAA	E			OFFICE			
12. DITLE NAME STREET ADDRESS	OFFICERS A D ALESHIRE, LOIS E	AND DIRECTORS	13. 11 TITL 12 NAA 13 STR	E IE			ÖFFICE			
12. HILE NAME STREET ADDRESS CHY-ST-Z-P	OFFICERS A D ALESHIRE, LOIS E 38045 COUNTY RD 439	AND DIRECTORS	13. 11 TITL 12 NAA 13 STR	E HE EET ADDRESS '-ST-ZIP			OFFICE			Addition
IZ. HILF HAME STREET ADDRESS DRY-ST-Z-P	OFFICERS A D ALESHIRE, LOIS E 38045 COUNTY RD 439 EUSTIS FL 32726	AND DIRECTORS DELETE	13. 11 TITL 12 NAA 13 STR 14 Cety	E HE EET ADDRESS '-ST-ZIP E			ÖFFICE		☐ Change	Additio
12. HILF NAME STREET ADDRESS CHY-ST-Z-P HILF NAME	OFFICERS A D ALESHIRE, LOIS E 38045 COUNTY RD 439 EUSTIS FL 32726 D	AND DIRECTORS DELETE	13. 11 TITL 12 NAA 13 STR 14 CITY 21 TITL 2.2 NAA	E HE EET ADDRESS '-ST-ZIP E			OFFICE		☐ Change	Addition
12. HILF NAME STREET ADDRESS DITY-ST-Z-P HILF NAME STREET ADDRESS	OFFICERS A D ALESHIRE, LOIS E 38045 COUNTY RD 439 EUSTIS FL 32726 D ALESHIRE, JOHN D	AND DIRECTORS DELETE	13. 11 TITL 12 NAA 13 STR 1.4 CITY 21 TITL 2.2 NAA 2.3 STR	e He Eet address '-st-zip E			OFFICE		☐ Change	Addition
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12. HILF VAME STREET ADDRESS DITY-ST-ZEP HILF VAME STREET ADDRESS DITY-ST-ZIP HILE	OFFICERS A D ALESHIRE, LOIS E 38045 COUNTY RD 439 EUSTIS FL 32726 D ALESHIRE, JOHN D 38045 COUNTY RD 439 EUSTIS FL 32726	ND DIRECTORS DELETE DELETE	13. 11 TITL 12 NAA 13 STR 14 CITY 21 TITL 2.2 NAA 2.3 STR 2.4 CIT	E EET ADDRESS '-SY-ZIP E HE EET ADDRESS Y-SY-ZIP E EET ADDRESS Y-SY-ZIP E				AND	☐ Change	Additio
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