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

PROFIT CORPORATION ANNUAL REPORT

1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600050869 (2)

| Principal Plac | \ | Mailing Address P 0 80X 1894 | | | |
|-----------------------------|---|---|--|---|--|
| CORAL-SPRING | 00 TE 90 0// | <u>-Coral-Springs-FL-330</u> 77 | | 3. Date Incorporated or Qualified 06/13/1996 | 3a. Date of Last Report |
| | lace of Business | 2a. Mailing Address | | 4. FEI Number | Applied For |
| | 5 CR 561 | 26 P.O. Box | 145 | 65 10644635 | Not Applicable |
| Sulte, Apt. | #, etc. | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| City & State | | City & State | | 6. Election Campaign Financing | \$5.00 May Be |
| 23 AS 1 | CATULLY, FL | 28 ASTATULA, | FL | | Added to Fees |
| Zip 24 347 | O 5 25 USA | 29 34705 3 | Country | 8. This corporation has liability for int | |
| 24 347 | 9. Name and Address of Curre | 120 | 0 4 2/1 | Florida Statutes 10. Name and Address of New Regi | Yes No |
| P1 Nonce | | | | | |
| | | | | WHITE DONALD M | <u> </u> |
| CORAL SPRINGS FL 33071 | | | Sireet A | ddress (P.O. Box Number is Not Acceptable 22825 | ;) |
| | | | 83 | | |
| | | | 84 City A | L L L | 85 Zip Code |
| | | 00 1007 1100 51 11 01 | ' | HSTATULA | FL 34705 |
| 11. Pursuant office or r | to the provisions of Sections 507.050 egistered agent, or both, in the State | u2 and 607.1508, Florida Statutes, e of Florida, Such change was aut | , the above-named of thorized by the corp. | corporation submits this statement for the pur oration's board of directors. I hereby accept | rpose of changing its registered the appointment as registered |
| | im familiar with, and accept the oblig | jations of, Section 307.0505, Florid | da Statutes 1 | 1. lallato | 4-25-97 |
| SIGNATURE | Signature, typed or printed name of registered ag | pent and lete if applicable (NOTE F | Registered Agent signature r | equired when reinstating) | DATE |
| 12. | OFFICERS AN | ND DIRECTORS | 13. | ADDITIONS/CHANGES TO OFFICE | |
| TITLE | D | ☐ DELETE | | P Vision and Control | Change Addition |
| NAME | MILLER, SANDRA R | | 1.2 NAME | WHITE, SANDRA R. P.O. BOX 145/22525 C.P. | 561 (Mame Jame) |
| STREET ADDRESS | 619 NW 88 DR CORAL SPRINGS FL 33071 | | | ASTATULA, FL 34705 | y will control |
| CITY-ST-ZIP TITLE | D | ☐ DELETE | 1 4 C(1Y - ST - Z(P 2 1 T)) LE | ASTRUBE PE STRES | Change Addition |
| NAME | WHITE, RICK R | | 2 2 NAME | | · · · · · · · · · · · · · · · · · · · |
| STREET ADDRESS | 2100 BEACON HILL DR | | 2 3 STREET ADDRESS | | |
| CITY-\$1-ZIP | LANSING MI 48906 | | 2 4 CITY · S1 - ZIP | | |
| TITLE | | ☐ DELETE | | P | Change Addition |
| NAME | | | 3.2 NAME | WHITE, DONALD M. 22825 CP 561 | (correction) addition |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | 22825 CF >61 | discillon |
| CITY-ST-ZIP TITLE | | ☐ DELETE | 3.4 CITY-ST-ZIP | ASTATULA, FL 34705 | Change Addition |
| NAME | | _ | 4. 2 NAME | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 4.4.0(TY-ST-7)P | | |
| TITLE | | ☐ DETEAL | 5 1 THLE | | ☐ Change ☐ Addition |
| NAME | | | 5.2 NAME | | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | DELETE | 5.4 CITY - \$1 - ZIP 6.1 TITLE | | Change Addition |
| NAME | | | 6.2 NAME | | La seringo La reputation |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 6.4 CiTY-ST-7IP | | |

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 prince 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 or on an attachment with an address.

FILED

Apr 30 1997 8:00am

Secretary of State