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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra R. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000057068 (4)

FILED May 08 1997 8:00am Secretary of State

| Principal Place of Business Mailing Address 115 CHANEY DRIVE 115 CHANEY DRIVE CASSELBERRY FL 32707 CASSELBERRY FL 32707-4534 | | | | | | |
|--|--|---|--|---|--|------------------------------------|
| 2. Principal Place | | 2a. Mailing Address | | Date Incorporated or Qualified 07/03/1996 FEI Number | 3a. Date of Last I | Report pplied For |
| | ANDO FL | 26 19231 CR | 33NW | UH 59338950 |) <u> </u> | lot Applicable |
| Suite Apt. # et | lc. | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | | Additional legulred |
| City & State | | City & State | ID FL | 6. Election Campaign Financing | \$5.00 |) May Be |
| 3 70000 | Country | 28 GROVELAM | Country | Trust Fund Contribution | | to Fees |
| [4] | 25 | | O LAK | 8. This corporation has liability for in Fiorida Statutes | Yes No | b. 189.U32, |
| | Name and Address of Current | Registered Agent | 81 Name | 10. Name and Address of New Re | gistered Agent | |
| 115 CH | il, robin Ancey drive Lberry fl 32707 | | 83 | ddress (P.O. Box Number is Not Acceptat | | |
| | | \sim | 84 City | | FL 85 Zip | Code |
| office or regist agent I am fa | o provisions of Sections 60. Gaoz tered agent, or both, in the State of minar with and accept the obliga | The 507, 1508, Florida Majures of Florida Such change was au tions of Salan 607,0505, For | s the above-named of thorized by the corpo ida Statutes. | corporation submits this statement for the poration's board of directors. I hereby accept | ourpose of changing of the appointment as | s registered |
| SIGNATURE State | rive by he over prints dinarres of registered agon | t and lifte if applicable (NOTE: | Registered Agent signature re | aquited when reinstating) | DATE | |
| SIGNATURE Saw | os ny na marine dinare of registived agen OFFICERS AND | DIRECTORS | 13. | | | |
| THE NAME | | | | | | Addition |
| Signal 12. THE NAME STREET ADDRESS CITY-SUIZE | | DIRECTORS DELETE | 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP | | CERS AND DIRECTO Change | Addition |
| S a set 12. THE NAME STREET ACCRESS CHY-SLIZEP THEE NAME STREET ACCRESS STREET ACCRESS STREET ACCRESS | | DIRECTORS | 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS | | | Addition |
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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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