FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 FILED Apr 29, 1997 8:00 am Secretary of State **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1997 **DOCUMENT #** Manky-deBoer Principal Place of Business Mailing Address 110 Simonton St. 5ame West, FC 33040 3. Date Incorporated or Qualified 3a. Date of Last Report 2. Principal Place of Business 2a. Mailing Address 4. FELNIA Applied For 110 Simenton 110 Simun 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional X 5. Certificate of Status Desired Fee Required 27 City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 8. This corporation has liability for intangible tax under s. 199.032, ΰŚĄ 3304 Yes X No Florida Statutes 29 25 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable 82 83 84 Ko. 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered stered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered amiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. April 25 1997 SIGNATURE (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 11 TITLE Change Addition TITLE 1.2 NAME NAME **Pichood** 13 STREET ADDRESS STREET ADDRESS 1 4 CITY -ST - ZIP CITY - ST - ZIP Change Addition DELETE 2.1 T(TLE TITLE 2.2 NAME NAME 2 3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY - ST - ZIP Addition DELETE Change 3 1 TITLE TITLE 3.2 NAME NAME deboen STREET ADDRESS 3 3 STREET ADDRESS 34 CITY-ST-ZIP CITY - ST - ZIP Addition Change DELETE 4 1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition □ DELETE 5 1 THILE TITLE 5.2 NAME MARKE 5 3 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - ZIP 4000021621**4**dange -05/01/97--01075--052 CITY - ST - ZIP DELETE Addition 6.1 TITLE TITLE 6.2 NAME NAME ***173.75 63 STREET ADDRESS STREET ADDRESS 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. SIGNATURE: