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Sandra B. Mortham

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FILED Apr 23 1997 8:00am Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			Apr 23 1997 8:00ar Secretary of State			
Principal Place of Bus 380 EUN STREET ENOLEWOOD FL 34223		Mailing Address 380 ELM STREET ENGLEWOOD FL 34223-401	10	3. Date Incorporati		3a. Date of Last		
2. Principal Place of I	Business	2a. Mailing Address		08/20/1996 4. FEI Number]	pplied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-338	87097	N	ot Applicabl	
22	7	27		5. Certificate of Sta	atus Desired		Additional equired	
City & State		City & State		6. Election Campai Trust Fund Cont			May Be to Fees	
Ζίρ	Country	Zip	Country	8. This corporation	has liability for i	ntangible tax under		
9. N	25 ame and Address of Current	29 t Registered Agent	[30]	Florida Statutes 10. Name and Add		Yes No		
11. Pursuant to the proffice or registere	NUT AVE DD FL 34223 ovisions of Sections 607.0507 d agent, or both, in the State	2 and 607 1508, Florida Statul of Florida, Such change was a	83 84 City es, the above-named authorized by the corp	Address (P.O. Box Number Corporation submits this state or attention is possible or attention of directors		FL 85 Zip	Code its registere	
11. Pursuant to the proffice or registere agent. I am famili	Ovisions of Sections 607.0507 d agent, or both, in the State or with, and accept the obligatived or printed name of registered agents	ntions of, Section 607.0505, Flo	82 Street 83 84 City es, the above-named authorized by the corp	corporation submits this sta oration's board of directors		FL 85 Zip		
11. Pursuant to the proffice or registere agent. I am famili SIGNATURE Signature.	NUT AVE DD FL 34223 ovisions of Sections 607.0502 d agent, or both, in the State ar with, and accept the obliga	ntiand life if applicable (NOTI	82 Street 83 84 City es, the above-named authorized by the corporida Statutes. E Registered Agent signature 13.	corporation submits this sta location's board of directors required when reinstiting) ADDITIONS/CHAI	alement for the p s. I hereby accep	urpose of changing of the appointment as	its registered registered	
11. Pursuant to the proffice or registere agent. I am familia SIGNATURE 12. TITLE D NAME SHEEL \$180.00000000000000000000000000000000000	OVISIONS OF Sections 607.0502 d agent, or both, in the State ar with, and accept the obligations of punted name of registered agent of FICERS AND TS, REGINA LM STREET	ntions of, Section 607.0505, Flo	83 84 City es, the above-named authorized by the corrorda Statules. E. Fregistered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	corporation submits this state that the state of the stat	alement for the p s. I hereby accep	FL 85 Zip urpose of changing of the appointment as	its registered registered	
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