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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000077141 (5)

PHAQ, INC.

Mailing Address

FILED May 12 1997 8:00am Secretary of State



Principal Place of Business		Maili	Mailing Address						
1224 10TH STREET SW LARGO FL 33770			1224 10TH STREET SW LARGO FL 33770-4435						
						3. Date Incorporated or Qualified 09/13/1996	3a. Dat	te of Las	t Report
2. Principal Place of E	Jusiness	2a. M	lailing Address			4. FEI Number		×	Applied For
1		26							Not Applicable
Suite, Apt. #, etc.		27 S	uite, Apt. #, etc.			5. Certificate of Status Desired	Ø		5 Additional Required
City & State			ity & State			6. Election Campaign Financing		\$5.0	0 May Be
3		28				Trust Fund Contribution		Adde	d to Fees
Zip ⊐	Country	·	ip .	Countr	y	8. This corporation has liability for			r s. 199.032,
4	25 ame and Address of Cu	29	and Amount	30		Florida Statutes 10. Name and Address of New Re	Yes [
		irrent negistei	en wåeur	81	Name	10. Maine and Address of New Ne	Biereleb w	Beur	
HEISNER, S				"	Manie				
1224 10TH STREET SW				82	Street Add	ddress (P.O. Box Number is Not Acceptable)			
LARGO FL 3	337 TU			83					
				•					
				84	City		f~1	85 Z	ip Code
						rporation submits this statement for the pation's board of directors. I hereby accept	<u>FL</u>		
12.	typed or profest rame of registers OFFICERS	ed agent and title if a S AND DIRECTI		TE: Registered Ap	eni signature requ	uired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND	DIRECT	ORS IN 12
ILLE DIP	17/5		DELETE	1.1 TITLE			······································	Chang	je 🔲 Additio
_{iame} H éisn	íer, steven j			1.2 NAME					
	10TH STREET SW			1.3 STREE	T ADDRESS				
CITY-ST-ZIP LARGO	O FL 33770			1.4 CITY -	ST-ZIP				
TTLE			DELETE	2.1 TITLE				☐ Chang	ge 🔲 Additio
NAME				2.2 NAME					
STREET ADDRESS				2.3 STREE	T ADDRESS				
CHTY - S1 - ZHP				2. 4 CITY	ST-ZIP				
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VAM:				3.2 NAME					
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STHEET ADDRESS				ľ	T ADDRESS				
CITY-ST-7iF				4.3 STREE					
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NAME				5.2 NAME	Ì				
STREET ADDRESS					T ADDRESS				
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TITLE			DELETE	6.1 TITLE				Chang	ge 🔲 Additio
NAME				6.2 NAME					
STREET ADDIGESS					1				
				6.3 STREE	T ADDRESS				
CITY - ST - ZIP				6.3 STREE 6.4 City-					

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:



4/28/97 (813) 585-8642