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

19	RATION REPORT	Kath Secr DIVISION C	PARTMENT OF STATE verine Harris etary of State of CORPORATIONS	FIL	-ED
CANOS P.O. DA	ENT # 996000 FLORE AN ACCUSED 133A Selection 14A- Business Bu	32322	ie, The	S9 JIJII -7	PILI2: 32 CI:STATE E, FLORIDA
Januarda 2 Principal Place of	Village, to	1/A. 3732≥ 0 1 2a. Mailing Address 26		DO NOT WRITE IN THI 3. Date incorporated or Qualified 9 -27 - 9 4. FET Number 59 -3415 901	S SPAC Applied For Not Applicable
Suite. Apt. #, etc 22 City & Stale 23 SAMAN 24 3 2 3 2	Obe VII/Age;	Suite, Apt #, etc. 27 City & State Zip Zip 29	Country	5. Certificate of Status Desired 6. Election Campa gn Financing Trust Fund Contribution 8. This corporation owes the current year in Personal Property Tax	\$8.75 Additional Fee Required \$5.00 May Be A ided to Fees stang-ble [TYe] [TNo
24://m ,138 I	Name and Address of Cu		81 Name	10. Name and Address of New Registered	Agent
office or registe agent. I am fan SiGNATURE Signat	e provisions of Sections 607 ered agent, or both, in the Si niliar with, and accept the ob ure typed or printed han e of registeria.	0502 and 607,1508, Florida State of Florida Such change was sligations of, Section 607,0505, layent and title if applicable.	s authorized by the corporation Florida Statutes Other Registered Agent signature requires		entment as registered
TILE NAME STREET ADDRESS CITY-ST-ZIP TILE	residual to soo bessor	AND DIRECTORS I DELETE The electric little, LA 301.	13. 11TITLE 12 NAME 13 STREET ADDRESS 14 CHY-SI-ZIP 23 TITLE	ADDITIONS/CHANGES TO OFFICERS A	ND DIR: CTORS IN 12 [] Change [] Addition [] Change [] Addition
1 7:7 F	1. Ilram M 0. 130x 133 cenceleelle 6. Millix P.O. 13	HA 3232 HA E POBLE OX 1336 N Delle, 7/32	27 NAME 23 STREET ADDRESS 2 4 CITY-ST-ZIP 31 TILLE 32 NAME 33 STREET ADDRESS	50000289 -06/03/99- ****158.7	
CITY-SI-ZP THE NAVE STREET ADDRESS CITY-SI-ZIP	Cancele	celle, 7/32	4 CITY-ST-ZIP 4 1 TIVLE 4 2 NAME 4 3 STREET ADDRESS 44 CITY-ST-ZIP		[Chinge [Adddor
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Ü. J DELETE	5 I TITLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CHY+ST-7IP		[Chinge
TITLE NAME STREEI ADDRESS CITY: ST-ZIP		DELETE	61 TITLE 62 NAME 63 STREET ADORESS 64 CITY-ST-ZIP		[]Chinge []Addition
14 I hereby certify	that the information supplied is annual report or suppleme or of the corporation or the r	d with this filing does not qualify rital annual report is true and ac eceiver or trustee empowered to	for the everyphon stated in S	ection 119 07(3)(i), Florida Statutes. I further ce shall have the same legal effect as if made und red by Chapter 607, Florida Statutes, and that n	rtify that the information er oath; that I am an ny name appears in the

6-9-99

Daytonia Ph. ex. #

5, Millian Lope, ded not secesse the annual Corporate report. sign Thefleam Jopes, Sa.,