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

PROFIT CORPORATION ANNUAL REPORT



FILED Apr 02 1997 8:00am Secretary of State

| | 1997 | | DIVISION OF | CORPOR | RATIONS | | Scoretai | _ | | |
|--|--|--|---|---|--|--|--|---|--|---|
| DOCUN 1. Corporation | | | 3711 (7) | | | | | | | |
| | | | | | | | | | | |
| Pencipal Piace | of Husiness | Mail | ing Address | | | | - | | 10 HILL FOLDS (11 | 01 101 10 0 |
| 316 A 8TH STREET ATLANTIC BEACH FL 32233 | | | P.O. BOX 50791 JACKSONVILLE FL 32240-0791 | | | | | | | |
| ATURNITO DERI | ON FL 32233 | au. | MOONVILLE LE 9254 | 00191 | | | | | | |
| | | | | | | | 3. Date Incorporated or Qualified 10/10/1996 | 3a. D. | ate of Last F | eport |
| 2. Principal Pia | ice of Business | 2a. N | Mailing Address | ······································ | | | 4. FEI Number | l | <u> </u> | ptied For |
| 21 Suite, Apt. # | | 26 | Suite, Apt. #, etc | | | | 59-3405822 | | | ot Applicable Additional |
| 22 | , Ca. | 27 | sone, Apr. #, tito | | | | 5. Certificate of Status Desired | | | Additional Equired |
| City & State | | } | City & State | | | | 6. Election Campaign Financing | | | May Be |
| 23] Zip | Country | 28 | Zipi | Co | untry | | Trust Fund Contribution 8. This corporation has liability for | intendible | | 100 032 |
| 24 | 25 | 29 | | 30 | · | | Florida Statutes | Yes [|] No | ,00.002., |
| | 9. Name and Address o | d Current Registe | red Agent | | 81 Nan | | 10. Name and Address of New Ro | gistered | Agent | |
| | IER, FRANK P ESQ. | | | | | | | | | |
| | S. MONROE ST. E 815 | | | | 82 Stre | et Addre | ss (P.O. Box Number is Not Accepta | ble) | | |
| | AHASSEE FL 32301 | | | | 83 | | | | | |
| - | | | | | 84 City | | | | 85 Zip | Code |
| , | | | | | POWED CITY | | | | | |
| 11. Pursuant M | the provisions of Sections | 607 0502 and 607 | / 1508 Florida Statu | utes the s | } | ad corpo | oration submits this statement for the | FL Durnose o | f changing i | s registered |
| 11. Pursuant to office or re | the provisions of Sections gistered agent, or both, in t familiar with, and accept I | 607.0502 and 607 the State of Florida the obligations of 5 | 7.1508, Florida Statu Such change was Section 607,0505, F | utes, the a authorize | } | ed corpo | pration submits this statement for the on's board of directors. I hereby acce | | f changing i pointment as | ts registered registered |
| SIGNATURE | | | | | above-named by the cututes. | | oration submits this statement for the on's board of directors. I hereby acce | purpose o pt the app | f changing i cointment as | ts registered registered |
| SIGNATURE | ognative, typed or proted name of re | | applicable (NC | | above-named by the cultutes. | | oration submits this statement for the on's board of directors. I hereby accedumentalisms when reinstains) ADDITIONS/CHANGES TO OFFI | purpose o pt the app | | |
| SIGNATURE | OFFIC | g stered agent and title if r | applicable (NC | OTE Registere | above-named by the cututes. | | d when reinstasing) ADDITIONS/CHANGES TO OFFI 185: Oln f | purpose o pt the app | | |
| SIGNATURE 12. HILF BANE | OFFIC D MORROW, HAL | g stered agent and title if r | applicable (NC | 13. 11.1 | above-named by the cultures. Bed Agent signs | Di | d when reinslating) ADDITIONS/CHANGES TO OFFI 185: Dent 1 MONNOW | purpose o pt the app | DIRECTOR | RS IN 12 |
| SIGNATURE 12. THUE NAME SIBELLADORESS | OFFICE D MORROW, HAL P.O. BOX 50791 | g size ted agreet and little If SERS AND DIRECT | applicable (NC | 13. 11.1 1.2 N | above-named by the cututes. and Agent signs at LE ITLE IAME STREET ADDRES | Di | d when reinstasing) ADDITIONS/CHANGES TO OFFI 185; Dent 187; Monrow 188; Beh Stable | purpose o pt the app DATE CERS ANI | D DIRECTOR Change | RS IN 12 |
| SIGNATURE 12. INCE MAN: SHEEL ADDRESS CITY-SL 70: | OFFIC D MORROW, HAL | g size ted agreet and little If SERS AND DIRECT | Applicable (NC ORS DELETE | 13. 11.1 1.2 M 1.3 S 1.4 C | above-named by the cultures. and Agent signs ITLE IAME STREET ADDRES EITY-SI-ZIP | Di | d when reinslashig) ADDITIONS/CHANGES TO OFFI 185: Dent 18 Monrow 18 Byh Stapef | purpose o pt the app | DIRECTOR | RS IN 12 Addition |
| SIGNATURE 12. HILE MANT: SHEEL ADDRESS | OFFICE D MORROW, HAL P.O. BOX 50791 | g size ted agreet and little If SERS AND DIRECT | applicable (NC | 13. 11.1 1.2 M 1.3 S 1.4 C | above-named by the cututes. and Agent signs at LE ITLE IAME STREET ADDRES | Di | d when reinstasing) ADDITIONS/CHANGES TO OFFI 185; Dent 187; Monrow 188; Beh Stable | purpose o pt the app DATE CERS ANI | D DIRECTOR Change | RS IN 12 |
| SIGNATURE TO THE SIGNATURE | OFFICE D MORROW, HAL P.O. BOX 50791 | g size ted agreet and little If SERS AND DIRECT | Applicable (NC ORS DELETE | 13. 11.7 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N | above-named by the cultures. and Agent signs and Agent | P. H. S. | d when reinstasing) ADDITIONS/CHANGES TO OFFI 185; Dent 187; Monrow 188; Beh Stable | purpose o pt the app DATE CERS ANI | DIRECTOR | RS IN 12 Addition |
| SIGNATURE 12. INCE NAM: SIBERTADDRESS CITY ST 70: THEE NAME SIBERTADDRESS CITY ST 70: | OFFICE D MORROW, HAL P.O. BOX 50791 | g size ted agreet and little If SERS AND DIRECT | Applicative (PAC ORS DELETE | 13. 111 1.2 M 1.3 1.4 C 2.1 T 2.2 M 2.3 S 2.4 4 | above-named by the citutes. Ed Agent Egne ITLE LAME STREET ADDRE TILE LAME THE LAME THE TADDRE | P. H. S. | d when reinstasing) ADDITIONS/CHANGES TO OFFI 185; Dent 187; Monrow 188; Beh Stable | purpose o pt the app DATE CERS ANI | D DIRECTOR Change 522 | S IN 12 Addition Addition |
| SIGNATURE 2 12. 100. 100. 100. 100. 100. 100. 100. | OFFICE D MORROW, HAL P.O. BOX 50791 | g size ted agreet and little If SERS AND DIRECT | Applicable (NC ORS DELETE | 13. 111 124 138 140 211 226 238 241 311 | IDOVE-NAME INTEL INTE | P. H. S. | d when reinstasing) ADDITIONS/CHANGES TO OFFI 185; Dent 187; Monrow 188; Beh Stable | purpose o pt the app DATE CERS ANI | DIRECTOR | RS IN 12 Addition |
| SIGNATURE 12. HILF NAM: SIBELLADDRESS CITY ST 70: DILF NAMP SIRELLADDRESS CITY ST 20: TITE NAME NAME | OFFICE D MORROW, HAL P.O. BOX 50791 | g size ted agreet and little If SERS AND DIRECT | Applicative (PAC ORS DELETE | DTE Registers 13. 111 12. 1.95 1.46 2.11 2.2. 2.35 2.41 3.11 3.2. | above-named by the citutes. If LE HAME STREET ADDRESTREET ADDRES | S S | d when reinstasing) ADDITIONS/CHANGES TO OFFI 185; Dent 187; Monrow 188; Beh Stable | purpose o pt the app DATE CERS ANI | D DIRECTOR Change 522 | S IN 12 Addition Addition |
| SIGNATURE 12. HILE NAM: SHREELADORESS CITY-ST-ZIE HILE NAME STREELADORESS CITY-ST-ZIE HILE NAME STREELADORESS | OFFICE D MORROW, HAL P.O. BOX 50791 | g size ted agreet and little If SERS AND DIRECT | Applicative (PAC ORS DELETE | 13. 111 12N 138 111 12V 138 14C 211 22N 235 241 311 32N 335 | ADOVE-NAME ADOVE-NAME ADOVE-NAME ADOVE-NAME ADDRES ADDRES | S S | d when reinstasing) ADDITIONS/CHANGES TO OFFI 185; Dent 187; Monrow 188; Beh Stable | purpose o pt the app DATE CERS ANI | D DIRECTOR Change 522 | S IN 12 Addition Addition |
| SIGNATURE 2 12. DUE NAM: SHEEL ADDRESS CITY ST 70: DIGE NAM! STREEL ADDRESS CITY ST 20: THE NAM! NAME | OFFICE D MORROW, HAL P.O. BOX 50791 | g size ted agreet and little If SERS AND DIRECT | Applicative (PAC ORS DELETE | 13. 111 12N 138 111 12V 138 14C 211 22N 235 241 311 32N 335 | above-named by the citutes and Agent signal title wame street addressing the city-st-zip-title was a street addressing the city-st-zip-title wame street addressing the city-st-zip-title water wat | S S | d when reinstasing) ADDITIONS/CHANGES TO OFFI 185; Dent 187; Monrow 188; Beh Stable | purpose o pt the app DATE CERS ANI | D DIRECTOR Change 522 | S IN 12 Addition Addition |
| SIGNATURE | OFFICE D MORROW, HAL P.O. BOX 50791 | g size ted agreet and little If SERS AND DIRECT | Applicative (PACORS DELETE DELETE DELETE | DTE Registers 13. 111 12N 138 14C 211 22N 238 2.41 3.11 32N 338 344 | above-named by the citutes and Agent signal title wame street addressing the city-st-zip-title was a street addressing the city-st-zip-title wame street addressing the city-st-zip-title water wat | S S | d when reinstasing) ADDITIONS/CHANGES TO OFFI 185; Dent 187; Monrow 188; Beh Stable | purpose o pt the app DATE CERS ANI | D DIRECTOR Change Change Change | Addition Addition |
| SIGNATURE 12. DILE NAME SIRELLADDRESS CITY-SL-ZIP TOLE NAME STRELLADDRESS CITY-SL-ZIP TOLE NAME STRELLADDRESS CITY-SL-ZIP TOLE NAME STRELLADDRESS CITY-SL-ZIP TOLE NAME STRELLADDRESS | OFFICE D MORROW, HAL P.O. BOX 50791 | g size ted agreet and little If SERS AND DIRECT | Applicative (PACORS DELETE DELETE DELETE | DTE Registers 13. 111 12. 13. 14. 211 22. 23. 2.4 311 32. 33. 34. 4.11 4.21 4.35 | above-named by the citutes. If Le street addresses the city-st-zip-litle same city-st-zip-litle same city-st-zip-litle same city-st-zip-litle same street addresses the city-st-zip-litle same city-st-zip-li | S S S S | d when reinstasing) ADDITIONS/CHANGES TO OFFI 185; Dent 187; Monrow 188; Beh Stable | purpose o pt the app DATE CERS ANI | D DIRECTOR Change Change Change | Addition Addition |
| SIGNATURE 12. THE NAME SHREE ADDRESS CITY-SE TREE | OFFICE D MORROW, HAL P.O. BOX 50791 | g size ted agreet and little If SERS AND DIRECT | Applicative (PACORS DELETE DELETE DELETE | DTE Registers 13. 111 12. 13. 14. 211 22. 23. 2.4 31.1 32. 34.1 4.17 4.22 4.38 | ADOVE-NAME ADOVE-NAME ADOVE ADDRES | S S S S | d when reinstasing) ADDITIONS/CHANGES TO OFFI 185; Dent 187; Monrow 188; Beh Stable | purpose o pt the app DATE CERS ANI | D DIRECTOR Change Change Change | Addition Addition Addition |
| SIGNATURE 12. THE NAME SHEEL ADDRESS CITY ST ZIP THE NAME SHEEL ADDRESS CITY ST ZIP THE NAME STREEL ADDRESS CITY ST ZIP THE NAME | OFFICE D MORROW, HAL P.O. BOX 50791 | g size ted agreet and little If SERS AND DIRECT | Applicative (PACORS DELETE DELETE DELETE | DTE Registers 13. 11.1 1.24 1.35 1.40 2.11 2.24 2.35 2.44 3.11 3.28 3.41 4.21 4.25 4.46 5.17 | above-named by the citutes. If Le street addressible street addressib | S S S S | d when reinstasing) ADDITIONS/CHANGES TO OFFI 185; Dent 187; Monrow 188; Beh Stable | purpose o pt the app DATE CERS ANI | D DIRECTOR Change Change Change | Addition Addition |
| SIGNATURE 12. DUE NAM: SIBSELADDRESS CITY-SL-ZIP DUE NAME SIBSELADDRESS CITY-SL-ZIP TOTE NAME SIBSELADDRESS CITY-SL-ZIP | OFFICE D MORROW, HAL P.O. BOX 50791 | g size ted agreet and little If SERS AND DIRECT | Applicative (PACORS DELETE DELETE DELETE | DTE Registers 13. 11.1 1.24 1.35 1.4C 2.11 2.24 2.35 2.41 3.11 3.24 3.35 3.4 4.17 4.21 4.35 4.4C 5.11 | ADOVE-NAME ADOVE-NAME ADOVE ADDRES | S S S S S S | d when reinstasing) ADDITIONS/CHANGES TO OFFI 185; Dent 187; Monrow 188; Beh Stable | purpose o pt the app DATE CERS ANI | D DIRECTOR Change Change Change | Addition Addition Addition |
| SIGNATURE 12. DUE MAN: SIRELADDRESS CITY-S1-70- DIEE NAME SIRELADDRESS CITY-S1-20- DUE NAME SIRELADDRESS CITY-S1-70- DUE NAME NAME NAME | OFFICE D MORROW, HAL P.O. BOX 50791 | g size ted agreet and little If SERS AND DIRECT | Applicative (PMC ORS) DELETE DELETE DELETE DELETE | DTE Registers 13. 11.1 1.24 1.35 1.4C 2.11 2.24 2.35 2.41 3.11 3.24 4.17 4.21 4.35 4.4C 5.11 5.24 6.33 | above-named by the citutes. In a second signal sig | S S S S S S | d when reinstasing) ADDITIONS/CHANGES TO OFFI 185; Dent 187; Monrow 188; Beh Stable | purpose o pt the app DATE CERS ANI | D DIRECTOR Change Change Change | Addition Addition Addition |
| SIGNATURE 12. DILE MAN: SIREELADDRESS CITY-S1-70- DILE NAME SIREELADDRESS | OFFICE D MORROW, HAL P.O. BOX 50791 | g size ted agreet and little If SERS AND DIRECT | Applicative (PACORS DELETE DELETE DELETE | DTE Registers 13. 11.1 1.24 1.35 1.4C 2.11 2.24 2.35 2.41 3.11 3.24 4.17 4.21 4.35 4.4C 5.11 5.24 6.33 | above-named by the citutes. If Le lame street addressing the citutes of the citutes. If Le lame street addressing the city-st-zip little lame street lame st | S S S S S S | d when reinstasing) ADDITIONS/CHANGES TO OFFI 185; Dent 187; Monrow 188; Beh Stable | purpose o pt the app DATE CERS ANI | D DIRECTOR Change Change Change | Addition Addition Addition |
| SIGNATURE 12. DILE NAM: SIREE ADDRESS CITY-ST-ZIP TOLE NAME SIREE | OFFICE D MORROW, HAL P.O. BOX 50791 | g size ted agreet and little If SERS AND DIRECT | Applicative (PMC ORS) DELETE DELETE DELETE DELETE | 13. 111 1.24 1.35 1.40 2.11 2.20 2.35 2.41 3.11 3.24 4.35 4.40 5.11 5.24 6.11 6.24 | above-named by the citutes. If Le lame street addresses the city-st-zip litte hame | S S S S S S S S S S S S S S S S S S S | d when reinstasing) ADDITIONS/CHANGES TO OFFI 185; Dent 187; Monrow 188; Beh Stable | purpose o pt the app DATE CERS ANI | D DIRECTOR Change Change Change Change | S IN 12 Addition Addition Addition Addition |
| SIGNATURE 12. DILE NAME SIBELLADDRESS CITY ST 700 DILE NAME SIBELLADDRESS CITY SU 700 DILE NAME SIBELLADDRESS CITY ST 700 TILLE | OFFICE D MORROW, HAL P.O. BOX 50791 | g size ted agreet and little If SERS AND DIRECT | Applicative (PMC ORS) DELETE DELETE DELETE DELETE | 13. 111 12. 13. 14. 211 22. 23. 24. 311 32. 43. 44. 41. 42. 43.8 44. 5.11 5.24 63.8 | above-named by the citutes. In a Agent eignest addresses and the citutes. In a Agent eignest addresses and the citutes. In a Agent eignest addresses and the citutes and th | S S S S S S S S S S S S S S S S S S S | d when reinstasing) ADDITIONS/CHANGES TO OFFI 185; Dent 187; Monrow 188; Beh Stable | purpose o pt the app DATE CERS ANI | D DIRECTOR Change Change Change Change | S IN 12 Addition Addition Addition Addition |

W- PAES: dent 3/3/97 341.