SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT **CORPORATION ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham 🕣

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000087623 (0)

WARN HARDAY COM INC



FILED 97 SEP 25 AM 8: 42

SECRETARY OF STATE

********	IIMGNATIOOM, ING.				TALLAFIA ALIHALIILLA IIIA IIIA AKANALII	ASSEE, FLORIDA
Principal Place	e of Business	Mailing Address	•~			IER DOUDT I DIEL FOOID DIELF HOUE HILL III
4296 WINDOVER WAY MELBOURNE FL 32934 4296 WINDOVER WAY MELBOURNE FL 32934						
					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	3a, Date of Last Report
A D-i		······································			10/21/1996	
2. Principal Place of Business		2a. Mailing Address			4. FEI Number	Applied For
Suite, Apt.	# oto	26			59.3408242	
50116, Apt.	π, O(O.	27 3011e, Apr. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State		City & State			6. Election Campaign Financing	
23		28			Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	y	8. This corporation owes or has pa	·····
24]	25	29	30		Personal Property Tax due June	
	g. Name and Address of Cu	rrent Registered Agent			10. Name and Address of New Re-	gistered Agent
GR/	AY, DEBORAH A		81	Name		
429	6 WINDOVER WAY		82	Street Addr	ress (P.O. Box Number is Not Acceptab	ıle)
MEL	LBOURNE FL 32934					
			83			
			84	City		85 Zip Code
						FL
Office or re	o the provisions of Sections our. egistered agont, or both, in the S in familiar with, and accept the of	tate of Florida. Such change was	s authorized by	v the corporat	oration submits this statement for the p lion's board of directors. I hereby accep	urpose of changing its registered it the appointment as registered
	Signature, typed or printed name of registi re-		O1F Hegistered Age	ent signature requir	ed when reinstating)	DATE
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	
TITLE	PRESIDENT	DELETE	± 1.1 InTLE			☐ Change ☐ Addition
NAME	DEBORAH A. C		1.2 NAME			
STREET ADDRESS	PENOGA I WORSP	YAW S	1.3 STREET			
CITY-ST-ZIP	MELS PL	BELETE DELETE	1.4 CITY - S		2000023	97-041280e-009Addition
TITLE					-09/25/	3/041580s-009.
NAME			2.2 NAME		****16	5.00 ****165.00
SPREET ADDRESS			2.3 STREET			
TITLE		DELETE	2.4 CITY - S 3.1 TITLE	S1-7#		Change Addition
NAME			3.1 THE			Li Change Li Addition
STREET ADDRESS			3.3 STREFT	AUDDECC		
CITY-ST-ZIP			3.4. C(1Y-5			
TITLE		☐ DELETE	4.1 TITLE	31.411		Change Addition
NAME		- -	4. 2 NAME			
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY+ST-ZIP			4.4 CITY - S			
TITLE	DELETE 5.1701E				Change Addition	
NAME			5.2 NAME			<u>-</u>
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY-S			•
TITLE		DELETE	61 TITLE			Charles Addition
NAME			62 NAME			Λ - χ .
OTOCCT ANADECC			6.0 61067.1	1000100		Y X4/1

CITY-ST-ZIP 6.4 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filin) 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 convertion 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 all accurate and dress.

www.limeray.com.inc.

4296 Windover Way Melbourne, Florida 32935

Phone 259-4987 Fax 259-1794

September 11, 1997

Annual Reports Fillings Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

Dear Sirs,

I have no record or evidence of receiving a "1st Notice" on this report. I have enclosed payment and completed report.

Sincerely

Doborah A. Gray