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Apr 01 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000088172 (7)

1. Corporation Name  
MARSHA CHESKO, INC.



Principal Place of Business: 11724 FRUBISHER COURT ORLANDO FL 32837  
Mailing Address: 11724 FRUBISHER COURT ORLANDO FL 32837-7745

3. Date Incorporated or Qualified: 10/25/1996  
3a. Date of Last Report: N/A

2. Principal Place of Business: 21  
2a. Mailing Address: 26

4. FEI Number: 59-3406500  
Applied For: Not Applicable

Suite, Apt. #, etc.: 22  
Suite, Apt. #, etc.: 27

5. Certificate of Status Desired: \$8.75 Additional Fee Required

City & State: 23  
City & State: 28

6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

Zip: 24  
Country: 25  
Zip: 29  
Country: 30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes [checked] No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

AMERILAWYER CHARTERED  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134

81 Name: MARSHA A CHESKO  
82 Street Address (P.O. Box Number is Not Acceptable): 11724 FRUBISHER COURT  
83  
84 City: ORLANDO FL 85 Zip Code: 32837

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0506, Florida Statutes.

SIGNATURE: Marsha A Chesko President

204-97

Signature typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Table with 4 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Row 1: PSTD, CHESKO, MARSHA A, 11724 FRUBISHER COURT, ORLANDO FL 32837. Includes DELETE checkboxes.

Table with 4 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Rows 11-14 for additions, 15-18 for changes. Includes Change and Addition checkboxes.

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: Marsha A Chesko

204-97 (407) 858-9864

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)