## 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 # P96000093634 (9)

9. Name and Address of Current Registered Agent

ERNEST L. KING, INC.

**CORPORATE CREATIONS** 

15210 AMBERLY DRIVE

SUITE 328

TAMPA FL 33647

Principal Place of Business		failing Address	<u> </u>	-				
7584 NW 3RD STREET		7584 NW 3RD STREET						
PLANTATION FL 33317		PLANTATION FL 33317			DO NOT WRITE IN THIS SPACE			
				3. Date	Incorporated or Qualified	3a. Date o	f Last Report	
				11/1	12/1996			
2. Principal Place of Business	26	. Mailing Address		4. FEI Number		Applied For		
21	26	26			65-0706741		Not Applica	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certif	icate of Status Desired	<b>\$</b>	8.75 Additional Fee Required	
City & State		City & State			on Campaign Financing Fund Contribution		5.00 May Be Added to Fees	
Zip C0	ountry 29	Zip	Country 30		corporation owes or has pain	_		

84 City Zip Code 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 607.0505, Florida Statutes.

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Name

CIONATURE								
SIGNATURE	Signature, typed or printed name of registered agent and	title if applicable. (NOTE	Registered Agent signature req	equired when reinstating) DATE				
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	D	DELETE	5.1 TITLE	☐ Change ☐ Addition				
NAME	King, elrnest l		1.2 NAME					
STREET ADDRESS	7584 NW 3RD STREET		1.3 STREET ADDRESS					
CITY-ST-ZIP	PLANTATION FL 33317		1.4 CITY - ST - ZIP					
TITLÉ	5	DELETE	2.1 TITLE	☐ Change ☐ Addition				
NAME	KING, FRANK E		2.2 NAME					
STREET ADDRESS	7584 NW 3RD STREET		2.3 STRFET ADDRESS	•				
CITY-ST-ZIP	PLANTATION FL 33317		2.4 CITY - ST - ZIP					
TITLE	D	DELETE	3.1 TITLE	☐ Change ☐ Addition				
NAME	KING, JIMMY P		3.2 NAME					
STREET ADDRESS	7584 NW 3RD STREET		3.3 STREET ADDRESS					
CITY-ST-ZIP	PLANTATION FL 33317		3 4. CITY - ST - ZIP					
TITLE	D	☐ DELET <b>E</b>	4.1 TITLE	Change Addition				
NAME	KING, MARCIA		4. 2 NAME					
STREET ADDRESS	7584 NW 3RD STREET		4.3 STREET ADDRESS					
CITY-ST-ZIP	PLANTATION FL 33317		4.4 CITY - ST - ZIP					
TITLE		☐ DELETE	51 TiTLE	Change Addition				
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET ADDRESS					
CITY-ST-ZIP			5 4 CITY - S1 - ZIP					
TITLE		☐ DELETE	6.1 TITLE	Change Addition				
NAME	en e		6.2 NAME					
STREET ADDRESS	5		6.3 STREE1 ADDRESS					

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.

6.4 CITY - ST - ZIP

**FILED** 

Aug 07 1997 8:00am

Secretary of State

10. Name and Address of New Registered Agent

Street Address (P.O. Box Number is Not Acceptable)

Applied For Not Applicable