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

PROFIT CORPORATION ANNUAL REPORT 198 1999 2000



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P970000 68167

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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fiorida Statutes, the above-named corporation submits this statement for the purposes 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 cacept the appropriate as 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 cacept the appropriate as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby cacept the appropriate as registered agent, or both, in the State of Florida. Statutes, the above-named corporation's statement for the purposes of changing is registered agent, or both, in the State of Florida. Statutes, the above-named corporation's statement for the purposes of changing is registered agent, or both, in the State of Florida. Statutes, the above-named corporation's statement for the purposes of changing is registered agent, or both, in the State of Florida. Such change was authorized by the corporation's statement for the purposes of changing is registered agent, or both, in the State of Florida. Such change was authorized by the corporation's statement for the purposes of change agent, and for the corporation's statement for the purposes of change agent, and for the corporation's statement for the purpose of change agent, and for the corporation authorized by the corporation authoriz				8	2 Street	Addres	s (P.O. Box	Number is Not Acc	eptable)		
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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, with all other like empowered.

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(56) 236-6533 Daytime Phone #