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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

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PORT	ILL & SO	NS, INC.						1 10 8 H 1 1 1	(1) 61 141 H 66 1 6 1116	18 (18 8 (1) 8 (an Bian Bian :	Estal Albil Cidla s
Principal Place o	of Business			Mailing Address								
6465 RIVER			,									
	NA BEACH F	L 32169		6465 RIVER RD. New Smyrna (2169						
							-	3. Date Incorpora	led or Qualified	3a. Da	ate of Last F	Report
								09/10/1	990		05/01/	1995
, Principal Piac]]	ce of Busines	S	·	Mailing Address				4. FEI Number	7000			Applied For
Suite, Apt. #,	etc.		26	LSuite, Apt. #, etc.				59-30			\$R 71	Not Applicable 5 Additional
			27]				5. Certificate of St	atus Desired			Required
City & State			28	City & State				6. Election Campa Trust Fund Cor			•	00 May Be
Zip	2	Country 5	29	Zip	30	ountry		8. This corporation Florida Statutes		intangible		
	9. Name a	nd Address of (Current Regi	stered Agent			L	10. Name and Ad	dress of New I	Registere	d Agent	
						81 Name	PF	NNÍNGER P	hilip E.			
	NGER, PHIL	JP E.				82 Street	Address	(P.O. Box Nurrioer	is Not Accepta	ble)		
	IVER RD.	1011 PL 66464	_			83	28	Springwood	Sg.			
NEW S	MYRNA BE	ACH FL 32169	9			63	POR	+ ORANGE	D			
											85 Z	p Code
						B4 City		•				2110
1. Pursuant to	the provision	is of Sections 60	7.0502 and 6	07.1508, Florida Sta	itutes, the al	hove-named c	orporatio	n submits this state	ement for the pu	rpose of c	hanoino its	2119 registered office
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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 attainment with an address.

SIGNATURE

DATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR