FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

S01716 **DOCUMENT #**

(7)

VANKEE BOAMED INC

TANK	EC NUAWEN, INC.										
Principal Place	of Business	Maile	ng Address						### #***		
31 BOUNDARY LANE 31 BOUNDARY L KEY WEST FL 33040 KEY WEST FL 33											
							3	I. Date Incorporated or Qualified 09/20/1990	3a. Dat	e of Last F 03/13/1	Report 1995
2. Principal Pla	Principal Place of Business 2a.			Mailing Address				4. FEt Number Applied For 65-0224384 Applied For Not Applicab			Applied For Not Applicable
Suite, Apt #, etc. 27			Suite, Apt. #, etc.			5	. Certificate of Status Desired		\$8.75 Additional Fee Required		
Orty & State			City & State			6	Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Ζιρ 24	Country 25	29	ib	30 Co.	intry			=	□No		s 199 032.
	9. Name and Address of Curre	nt Register	red Agent		I,		10). Name and Address of New F	Registered	Agent	
					81	Name					
HILL, ALAN G. 31 BOUNDARY LANE					82	Street Add	ress (l	ess (P.O. Box Number is Not Acceptable)			
KEY W	/EST FL 33040				83						
					84	City				85 2	ip Code
					Ιİ	·			FL	_	
11. Pursuant to or registere familiar wit	o the provisions of Sections 607.050 ed agent, or both, in the State of Floi h, and accept the obligations of, Sec	2 and 607.1 ridal Such c stion 607.05	I508, Florida Statu hange was autnori. 05, Florida Statute	tes, the abo zed by the o s.	corpi	amed corpo oration's boa	ration and of	submits this statement for the pu directors. I hereby accept the app	rpase of chointment a	ianging its s registere	registered office d agent. I am
SIGNATURE											
	Signature, typed or printed can cloff registered age:				A.jen	t Saptiat verseigere	st w ^e to		DATE		
12.	OFFICERS AN	ND DIRECTO		13.				ADDITIONS/CHANGES TO OFF			
TITLE	HILL, ALAN G.		☐ DELETE	117						☐ Change	Addition
NAME	31 BOUNDARY LN			12 N							
STREET ADDRESS	KEY WEST FL 3304	5				ADDRESS					
CITY-ST-7iP TITLE	T	·	DELFIE	2 1 1	ITY S	1 219				Change	Addition
NAME	SHEA, PAUL M.		Доши	22 N						L] Onlings	[Notifier
STREET ADDRESS	23 DALE AVE					ADDRESS					
•	GLOUCESTER MA 0/9	130			TY-S						
CITY - ST - ZIP TITLE			DELETE	3 1 7		1.2.5				Change	Addition
NAME			_	3 2 N					•		_
STREET ADDRESS				335	STREET	ADDRESS					
CITY - ST - ZIP					jīv. S						
TITLE			☐ DELETE	4 1 1						Crange	Addition
NAME				42 N	IAME						
STREET ADDRESS				438	JREET	ADDRESS					
CITY - ST - ZIP				. 440	JTY - S	T - ZIP					
TITLE			DELETE	5 1 1	NTLE					Change	Addition
NAME				5 2 N	IAME						
STREET ADDRESS				538	TREET	ADDRESS					
CITY - ST - ZIP				540	IIY-S	1 - 219					
PILE			☐ DELETE	6 1 ¹	IIILE					Change	Add tion
NAME				621	AME						
STREET ADDRESS				638	TREET	ADDRESS					
CITY - ST - ZIP						T - ZIP					
14. I do hereb	y certify that the information supplied	I with this fill	ing is voluntarily fur	mished and	doe:	s not qualify.	for the	e exemption stated in Section 119	1.07(3)(k), F	lorida Stati	utes. 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 earth; that I am an officer or director of the corporation or the indicated entry is a signature shall have the same legal effect as if made under earth; that I am an officer or director of the corporation or the indicated entry is true and accurate and that my signature shall have the same legal effect as if made under earth; that I am an officer or director of the corporation or the indicated entry is true and that my signature shall have the same legal effect as if made under earth; that I am an officer or director of the corporation or the indicated entry is true and that my signature shall have the same legal effect as if made under earth; that I am an officer or director of the corporation or the process.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CALAN G. HILL, PRESIDENT

(305) 294-6963

Daytme Phone #

CR2E034 (12/95)