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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S07203

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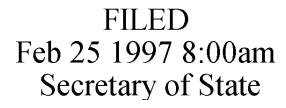
MSAM, INC.

950 22ND STREET NORTH SUITE 800 BIRMINGHAM AL 35203

Mailing Address

950 22ND STREET NORTH SUITE 800

BIRMINGHAM AL 35203-1126





									3. Date Incorporated 10/16/1990	or Qualified		te of Las 21/199			
2. Principal P	lace of Busin	2a. Maili	2a. Mailing Address					4. FEt Number				Applied For			
21		26	<u> </u>					63-1032708				Not Applicable			
Suite, Apt	#, etc		Suite, Apt. #, etc.						·····		\$8.7	5 Additional			
22		27	27					5. Certificate of Status	s Desired			Required	-		
City & State	Ú		City & State					6. Election Campaign Financing \$5.00 May Be							
23		28	28				Trust Fund Contribution				Added to Fees				
Zip		Country	Zıp		Co	untry			8. This corporation ha	as liability for i	ntangible	tax unde	rs. 199.032,		
24	;	25	29		30				Florida Statutes		Yes [
······································	9. Name	and Address of Curre	ent Registered	Agent					10. Name and Addres	s of New Re	platered /	Agent			
CT (CORPORAT	ION SYSTEM				81	Name								
1000 COLUMN BINE ICLAND BOAD						92 Ctrost Addrson (D.O. Poy Number in Net Assessable)									
						02	82 Street Address (P.O. Box Number is Not Acceptable)								
, 0,	ATTATION T	L 000ET				83									
						84	City				FL	85 Z	ip Code		
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office or r	to the provisi egistered agi	ons of Sections 607.03 ent. or both, in the Sta	te of Florida. Su	ub, Fiorida Statut ich changé was :	es, the a authoriza	id by	the corp	corpore	ation submits this state o's board of directors. I	ment for the p	orpose or of the app	criangin ointment	g its registere as registered	eo	
agent. La	rn familiar wit	h, and accept the obli	gations of, Sec	tion 607.0505, Fi	orida Sta	tutes	3.						•		
SIGNATURE														_	
	Signature, typed	or printed name of registered a				d Age	nt signature	required v	when reinstating)		DATE				
12.		OFFICERS A	ND DIRECTOR		13.		······································		ADDITIONS/CHANG	ES TO OFFIC	ERS AND				
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NAME		N, TERRY W.		1.2 N											
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14. I do herel	by certify that	the information suppl	ied with this lilir	ng does not qual	fy for the	е өхе	motion s	stated in	Section 119.07(3)(i), F	lorida Statute	s. I further	certify t	hat 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 it made under oath; that I am an officer or director of the corpy ation or the property of the corpy ation of the corpy ation or the property of the corpy ation of of appears in Block 12 or

SIGNATURI