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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Feb 10 1997 8:00am

Secretary of State

Date

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S11515

(1)

PERRINE INVESTMENT, INC.

Principal Place	e of Business	Mailing Address											
BOI WEST VINE ST			801 WEST VINE ST										
SUITE 122			SUITE 122										
KISSIMMEE FL 34741			KISSIMMEE FL 34741-41	102				2 Date	Incorporated as	Overfice	las D	-1- of Look !))
							3. Date Incorporated or Qualified 11/08/1990 3a. Date of Last Report 01/25/1996				teport		
	lace of Business		2a. Mailing Address	***************************************					Number		***************************************	A	pplied For
21			26					59-3036296 Not Applicable					ot Applicable
Suite Apt. #, etc.			Suite, Apt. #, etc.					5 Cert	ificate of Status D	esired			Additional
22			27					5. 56,	mone or orange p				equired
City & State			City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees						
Zip	Cor	Zip	Country				8. This corporation has liability for intangible tax under s. 199.032,						
24	25 29				30 Florida Statutes						Yes [,, (00,000,
		idress of Current Re						10. Nan	ne and Address	of New Re	gistered .	Agent	
LEES	S, COLIN				81	Nam	е						
801 1	W VINE ST				82 Street Addr			ss (P.O. B	ox Number is No	Acceptab	ole)		
STE	122 SIMMEE 34741				63								
11100	NNINGS VIIII				B4	City						laz Zin	Code
					0-4	City					FL	65 Zip	Code
office or re	registered agent, or l	both, in the State of F	nd 607.1508, Florida Sta Florida. Such change wa ns of, Section 607.0505,	as autho	orized by	the co	ed corpo orporatio	oration sub on's board	omits this stateme of directors. I he	nt for the p reby accep	urpose of at the app	i changing i iointment as	its registered registered
SIGNATURE	Signature speed or printed	name of registered agont an	or title if apply able ((NOTE: Rea	ustered Apr	on signat	ıra require	d when reinste	alieva)		DATE		
12.	IRECTORS		13.		***************************************		TIONS/CHANGES	TO OFFIC		DIRECTO	RS IN 12		
TITLE	D		DELETE		1.1 TITLE		110		Sec-Treas			Change	Addition
NAME	LEES, COLIN				1.2 NAME		""	SU EM	1050- 111-	•			
STREET ADDRESS	801 W VINE ST				1.3 STREET	ADDRES	s						
CITY-ST-ZIP	KISSIMMEE FL				14 CITY-5		´			•			,
TITLE	D		DELETE		21 TITLE	1-64	Tu.	e- Nes	······································			Change	Addition
NAME	LEES, JOYCE		_		22 NAME		V4.	D. 1112				-	_
STREET ADDRESS	801 W VINE ST				23 STREET	ADDRES	,						
CITY-ST-ZIP	KISSIMMEE FL			1	2 4 City-8		´						
TIFLE	D		DELETE		3.1 TITLE)1 2.,	+					Change	Addition
NAME	SNOW, AUDREY	1	_		3.2 NAME					•	*,**		
STREET ADDRESS	OSBORNE LOD				3.3 STREET	ADORES	s						
CITY-ST-ZIP	ST. LELIER, JER			1	3.4. CITY - S		´						
TITLE			DELETE	_	4.1 YITLE	J1 4	+		·			Change	Addition
NAME					4. 2 NAME							-	_
STREET ADDRESS					4.3 STREET	ADDRES	s						
CITY-ST-ZIP					4.4 CITY-S								
TITLE	<u> </u>		DELETE		5.1 TITLE	1 44						Change	☐ Addition
NAME				1	5.2 NAME		1				•		
STREET ADDRESS					5.3 STREET	ADDRES	s						
CITY-ST-ZIP					5.4 CITY-S	iT-ZIP							
TITLE			☐ D€LETE		6.1 TITLE		1					Change	Addition
NAME				1.	6.2 NAME								
STREET ADDRESS					6.3 STREET	ADDRES	s						
CITY-ST-ZIP					6.4 CITY-S		<u> </u>						
14. I do heret			th this filing does not qu	ualify for	r the exe	mptior							
informatio	on indicated on this a	annual report or supple correlation or the	ptemental annual report	is true a	and accu	urate a	nd that i	my signatu - es require	ure shall have the ed by Chapter 601	same lega Florida S	il effect as	s if made ur	ider oath; that
appears in	n Block 12 or Block	13 if changed, or on	e receiver or trustee emp an attachment with an	address	i.			40,040,0	,, oap.o. oo.	, , , , , , , , , , , , , , , , , , , ,	1010100, 12	* i.a. (. i.a	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,