SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

(4)

Principal Ptace of Business Mailing Address 432 BISON CIRCLE APOPKA FL 32712 US IIS										
US		U\$				3. Date Incorporated or Qu	ualified	3a. Date o		port
2. Principal I	Place of Business	2a. Mailing Address				12/05/1990 4. FEI Number		04/27		pried For
21	i lade of Eddiness	26				59-3042189				Applicable
Suite, Apt	: #, etc	Suite, Apt. #, etc.				5. Certificate of Status Des		\$	8.75 A	
22		27				5. Certificate of Status Des	wed [Fee Rec	quired
City & Sta	ite	City & State				6. Election Campaign Fina	ncing [\$5.00	
23	Country	28	T	untry		Trust Fund Contribution			Added to	
Z(p 24]	25	Ζιρ 29	30	Jillry		8. This corporation has liat Florida Statutes		~	under s. Io	199 032,
24	9. Name and Address of Curre			Τ		10. Name and Address of				·
1. A.	CGUFFIN, PATRICK J			81	Name		·			
	12 BISON CIRCLE			82	Street Addre	ess (P.O. Box Number is Not A	coentable)			
	POPKA FL 32712				ou con ridan	235 (1:0: £15x 14011156) 15 140(A	ecepiane,			
				83						
				84	City			TE	5 Zip (ode
	t to the pravisions of Sections 607.05			$\perp \perp$				┡┖		
agent. L	registered agent, or both, in the Stati am familiar with, and accept the obliq	gations of, Section 607 0505, I	Florida Stat	utes	·	•				5
SIGNATURE	Signature, typed or printed or the other of regentered as		. He Boyston		s graturo require	ed when reinslaving)	·····	DA1t		
12.	OFFICERS A	ND DIRECTORS	. Эте Војебен 13.	si Agants	s grafiere require	st when remaining) ADDITIONS/CHANGES T	O OFFICE			
12.	OFFICERS A		.) It Bujerone 13.	ai Agaaris	s grafure require		O OFFICER		RECTORS Change	S IN 12 Addition
12. TITLE NAME	OFFICERS AI C MC GUFFIN, PATRICK J.	ND DIRECTORS	113. 1 1 1 1 1 2 N	of Agents ITLE IAME			O OFFICER			
12. TITLE NAME STREEL ADDRESS	OFFICERS AI C MC GUFFIN, PATRICK J. 432 BISON CIRCLE	ND DIRECTORS	13. 117. 117. 12N 13S	Agents ITLE IAME	ORESS		O OFFICER			
12. TITLE NAME	OFFICERS AI C MC GUFFIN, PATRICK J.	ND DIRECTORS	13. 117. 117. 12N 13S	of Agents ITLE IAME JREET AD ITY - ST - 1	ORESS		O OFFICER			
12. TITLE NAME STREEL ADDRESS CITY ST. ZIP	OFFICERS AT C MC GUFFIN, PATRICK J. 432 BISON CIRCLE APOPKA FL P MCGUFFIN, SHEILA A.	ND DIRECTORS DELETE	113. 117. 117. 12N 13S	NTRE NAME NAME NAME NAME NAME NAME NAME NAM	ORESS		O OFFICER		Change	Addition
12. TITLE NAME STREEI ADDRESS CITY - ST - ZIP TITLE	OFFICERS AT C MC GUFFIN, PATRICK J. 432 BISON CIRCLE APOPKA FL P MCGUFFIN, SHEILA A. 432 BISON CIRCLE	ND DIRECTORS DELETE	13. 117. 117. 12N 13S 14C 21T.	NTRE NAME NAME NAME NAME NAME NAME NAME NAM	ORESS ZIP		O OFFICER		Change	Addit.on
12. TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME STREEL ADDRESS CITY-ST-ZIP	OFFICERS AT C MC GUFFIN, PATRICK J. 432 BISON CIRCLE APOPKA FL P MCGUFFIN, SHEILA A.	ND DIRECTORS DELETE DELETE	113. 1171 12N 13S 14C 21T1 22N 23S	ITLE IAME ITSET AD	ORESS ZIP ORESS		O OFFICER		Change Change	Addition Addition
12. TITLE NAME STREEI ADDRESS CITY - ST - ZIP TITLE NAME STHEET ADDRESS CITY - ST - ZIP TITLE	OFFICERS AT C MC GUFFIN, PATRICK J. 432 BISON CIRCLE APOPKA FL P MCGUFFIN, SHEILA A. 432 BISON CIRCLE	ND DIRECTORS DELETE	13. 1171 12N 13S 14C 21T 22N 23S 240 31T	ITLE IAME ITTLE IAME ITTLE ITTLE ITTLE IAME ITTLE ITTLE ITTLE	ORESS ZIP ORESS		O OFFICER		Change	Addition
12. TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AT C MC GUFFIN, PATRICK J. 432 BISON CIRCLE APOPKA FL P MCGUFFIN, SHEILA A. 432 BISON CIRCLE APOPKA FL	ND DIRECTORS DELETE DELETE	113. 1171 12N 13S 14C 21T 22N 23S 24C 31T 32N	STAGETAD THE TREETAD THE TREETAD THE THE THE THE THE THE THE TH	ORESS ZIP ORESS ZIP		O OFFICER		Change Change	Addition Addition
12. TITLE NAME STREEI ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AT C MC GUFFIN, PATRICK J. 432 BISON CIRCLE APOPKA FL P MCGUFFIN, SHEILA A. 432 BISON CIRCLE APOPKA FL	ND DIRECTORS DELETE DELETE	113. 1171 12N 13S 14C 21T 22N 23S 24C 31T 32N 33S	STREET AD STREET AD STREET AD STREET AD STREET AD STREET AD	ORESS ZIP ORESS ZIP		O OFFICER		Change Change	Addition Addition
12. TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AT C MC GUFFIN, PATRICK J. 432 BISON CIRCLE APOPKA FL P MCGUFFIN, SHEILA A. 432 BISON CIRCLE APOPKA FL	ND DIRECTORS DELETE DELETE	113. 1171 12N 13S 14C 21T 22N 23S 24C 31T 32N 33S 34C	ITLE IAME	ORESS ZIP ORESS ZIP		O OFFICER		Change Change Change Change	Addition Addition
12. TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AT C MC GUFFIN, PATRICK J. 432 BISON CIRCLE APOPKA FL P MCGUFFIN, SHEILA A. 432 BISON CIRCLE APOPKA FL	ND DIRECTORS DELETE DELETE DELETE	113. 1171 12N 13S 14C 2171 22N 23S 24C 311 32N 33S 34C 417	THE LANGE AND CITY-ST.	ORESS ZIP ORESS ZIP		O OFFICER		Change Change	Addition Addition
12. TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AT C MC GUFFIN, PATRICK J. 432 BISON CIRCLE APOPKA FL P MCGUFFIN, SHEILA A. 432 BISON CIRCLE APOPKA FL	ND DIRECTORS DELETE DELETE DELETE	113. 1111 12N 13S 14C 21T 22N 23S 24C 31T 32N 33S 34C 41T 428	ITLE IAME ITREET AD ITTY - ST -: ITTLE IAME ITTLE IAME ITTLE IAME ITTLE IAME ITTLE IAME IAME IAME IAME IAME IAME IAME IAM	ORESS ZIP ORESS ZIP ORESS ZIP		O OFFICER		Change Change Change Change	Addition Addition
12. TITLE NAME STREEI ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AT C MC GUFFIN, PATRICK J. 432 BISON CIRCLE APOPKA FL P MCGUFFIN, SHEILA A. 432 BISON CIRCLE APOPKA FL	ND DIRECTORS DELETE DELETE DELETE	13. 11.11 12.N 13.S 14.C 21.11 22.N 23.S 24.C 31.I 32.N 33.S 34.C 41.T 4.2.f 43.S	THE LANGE AND CITY-ST.	ORESS ZIP ORESS ZIP ORESS ZIP		O OFFICER		Change Change Change Change	Addition Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	OFFICERS AT C MC GUFFIN, PATRICK J. 432 BISON CIRCLE APOPKA FL P MCGUFFIN, SHEILA A. 432 BISON CIRCLE APOPKA FL	ND DIRECTORS DELETE DELETE DELETE	13. 11.11 12.N 13.S 14.C 21.11 22.N 23.S 24.C 31.I 32.N 33.S 34.C 41.T 4.2.f 43.S	ITAGET AND THE TREET AND THE T	ORESS ZIP ORESS ZIP ORESS ZIP		O OFFICER		Change Change Change Change	Addition Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AT C MC GUFFIN, PATRICK J. 432 BISON CIRCLE APOPKA FL P MCGUFFIN, SHEILA A. 432 BISON CIRCLE APOPKA FL	ND DIRECTORS DELETE DELETE DELETE	13. 1111 12N 13S 14C 21Ti 22N 23S 24C 31II 32N 33S 34 C 41T 4 2! 43S 44C 51T	ITAGET AND THE TREET AND THE T	ORESS ZIP ORESS ZIP ORESS ZIP		O OFFICER		Change Ch	Addition Addition Addition
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS ALL C MC GUFFIN, PATRICK J. 432 BISON CIRCLE APOPKA FL P MCGUFFIN, SHEILA A. 432 BISON CIRCLE APOPKA FL	ND DIRECTORS DELETE DELETE DELETE	13. 11 11 12 N 13 S 14 C 21 T 22 N 23 S 24 C 31 I 32 N 33 S 44 C 41 T 42 P 43 S 44 C 51 T 52 N	ITAGESTANDE ITAGESTAND ITAGE	ORESS ZIP DRESS ZIP ORESS ZIP JORESS ZIP		O OFFICER		Change Ch	Addition Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS ALL C MC GUFFIN, PATRICK J. 432 BISON CIRCLE APOPKA FL P MCGUFFIN, SHEILA A. 432 BISON CIRCLE APOPKA FL	ND DIRECTORS DELETE DELETE DELETE DELETE	13. 1111 12N 13S 14C 21Ti 22N 23S 24C 31II 32N 33S 44C 41T 42! 43S 44C 51T 52N 53S	ITAGESTA AND THE TREET AND THE	ORESS ZIP DRESS ZIP CRESS ZIP DRESS ZIP		O OFFICER		Change Change Change Change Change Change	Addition Addition Addition Addition
TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS ALL C MC GUFFIN, PATRICK J. 432 BISON CIRCLE APOPKA FL P MCGUFFIN, SHEILA A. 432 BISON CIRCLE APOPKA FL	ND DIRECTORS DELETE DELETE DELETE	13. 11 11 12 N 13 S 14 C 21 Ti 22 N 23 S 24 C 31 I 32 N 33 S 34 C 41 T 42 f 43 S 51 T 52 N 53 S 54 C 61 I	ITAGESTA AND THE STREET AND THE STRE	ORESS ZIP DRESS ZIP CRESS ZIP DRESS ZIP		O OFFICER		Change Ch	Addition Addition Addition
12. TITLE NAME STREEI ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS ALL C MC GUFFIN, PATRICK J. 432 BISON CIRCLE APOPKA FL P MCGUFFIN, SHEILA A. 432 BISON CIRCLE APOPKA FL	ND DIRECTORS DELETE DELETE DELETE DELETE	13. 11 11 12 N 13 S 14 C 21 Ti 22 N 23 S 24 C 31 I I 32 N 33 S 34 C 41 T 42 d 43 S 44 C 51 T 52 N 53 S 54 C 61 I 62 N	ITAGEST AND THE STREET AND THE STREE	ORESS ZIP DRESS ZIP CRESS ZIP DRESS ZIP DRESS ZIP		O OFFICER		Change Change Change Change Change Change	Addition Addition Addition Addition
TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS ALL C MC GUFFIN, PATRICK J. 432 BISON CIRCLE APOPKA FL P MCGUFFIN, SHEILA A. 432 BISON CIRCLE APOPKA FL	ND DIRECTORS DELETE DELETE DELETE DELETE	13. 1111 12N 13S 14C 21Ti 22N 23S 24C 31T 32N 33S 34C 41T 428 43C 51T 52N 53S 54C 61T 62N 63S	ITAGESTA AND THE STREET AND THE STRE	ORESS ZIP DRESS ZIP JORESS ZIP DRESS ZIP DRESS ZIP DRESS		O OFFICER		Change Change Change Change Change Change	Addition Addition Addition Addition

to nemery certify that the information supplied with this tring is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Statutes I further certify that the information indicated on this annual report or suppliemental 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Over 1997 AND 1997