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

## CORPORATION



COF ANNU	PROFIT CORPORATION ANNUAL REPORT  1997  FLORIDA DEPARTM Sandra B. 1 Secretary of DIVISION OF CO			Apr 15 1997 8:00am Secretary of State	
DOCUI 1. Corporatio	MENT # \$2278	38 (1)	ann <sub>er</sub> , , , , , , , , , , , , , , , , , , ,		BARA BABA BABA BABA BABA BABA BABA
Principal Place of Business Mailing Address  105 LIGHTERLOG LN AUBURNDALE FL 33823  Mailing Address  105 LIGHTERLOG LN AUBURNDALE FL 33823-9548			B		OUDII BABAI BIDII DIBII DIBII DIBII IDDI
2. Principal P	lace of Business	<b>2a.</b> Mailing Address	· .	a. Date Incorporated or Qualified     01/04/1991     4. FEI Number	3a. Date of Last Report 05/01/1996 Applied For
21	h - h	26		59-3041630	Not Applicable
Suite Apt.	#, <b>c</b> tG.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	0	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for Florida Statutes	intangible tax under s. 199.032,
24	25 9. Name and Address of Cu		30)	10. Name and Address of New Re	
HICKS, ROBERT L. 81 Name					
105 LIGHTERLOG LN 82 Street Address (P.O. B				ddress (P.O. Box Number is Not Accepta	ble)
AUB	URNDALE FL 33823		83		
l					1-17:0-4
			"		FL 85 Zip Code
11. Pursuant office or r	to the provisions of Sections 607 egistered agent, or both in the	9502 and 607.1508, Florida Statute: tate of Florida. Such change was au	s, the above-named outhorized by the corpo	orporation submits this statement for the pration's board of directors. I hereby acce	purpose of changing its registered upt the appointment as registered
	m familiar with, and all lidn that	fligations of Section 607.0505, Flor		L. Hick Pres	4/210-97
SIGNATURE	Stgruino, typed or prodro name of registers	d agent and title Lapplicable. (NOTE	Registered Agent signature re		DATE
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	
tit.e	PD	☐ DELETE	1,1 TITLE		Change Addition
NAME	HICKS, ROBERT L.		1,2 NAME		ļ:
STREET ADDRESS	105 LIGHTERLOG LN AUBURNDALE FL		1.3 STREET ADDRESS		ł!
City-St-7iP	V	DELETE	1.4 CITY-ST-2IP 2.1 TITLE		Change Addition
NAME	HICKS, CAROLYN	mentage	2.2 NAME		- 19-
STREET ADDRESS	105 LIGHTERLOG LANE		2.3 STREET ADDRESS		]
CITY+ST-ZIP	AUBURNDALE FL		2.4 CITY-ST-ZIP		
111.E		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		İ
STREET ADDRESS			3.3 STREET ADDRESS	4 Mr. 18	1
City St. ZiP	/ ',,	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	• 4.	Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		İ
011Y - \$1 - 7/2			4.4 CITY - ST - ZIP		
Tille		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		}
STREET ACCURESS			5.3 STREET ADDRESS		
CHY-ST-ZIP		DELETE	5.4 CITY - ST - ZIP		Change Addition
TITLE		☐ DETEIE	6.1 TITLE		Change Addition
NAME STREET ADORESS			6.2 NAME 6.3 STREET ADDRESS		Ì
CITY OF 712			6.3 STREET ADDRESS		

14. I do bereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, 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 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 3 if changing or binan attachment with an address.

SIGNATURE:

### Company of the corporation of the corporation of binan attachment with an address.

**SIGNATURE:** 

**FILED**