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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name

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Country

9. Name and Address of Current Registered Agent

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Principal Place of Business

Mailing Address

2a. Mailing Address

City & State

 $Z_{\rm ID}$

Suite, Apt. #, etc.

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598 S W HIDDEN RIVER AVE PALM CITY FL 34990

2. Principal Place of Business

ZAMBO, RICHARD A

PALM CITY FL 34990

598 S W HIDDEN RIVER AVE

Suite, Apt. #, etc.

City & State

21

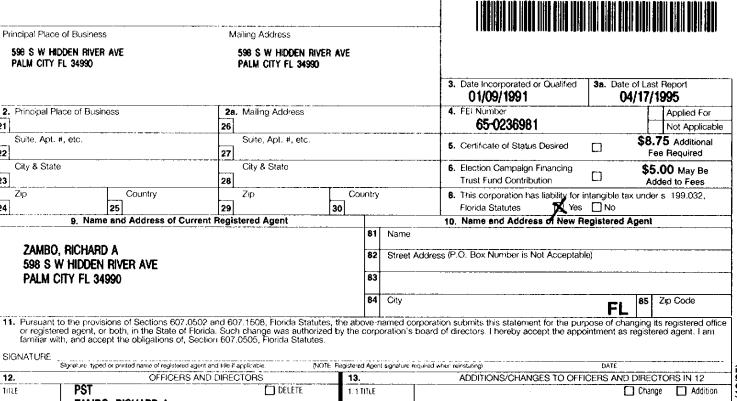
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598 S W HIDDEN RIVER AVE PALM CITY FL 34990



DELETE	familiar witt	h, and accept the obligations of, Section 607.	0505, Florida Statutes.	a by the corporation of	our discussions. Thereby accopt the appointment as registered	agon. ram	
12.	SIGNATURE	Stonature typed or printed name of registered agent and title if a	acolicabie. /NOT	E. Registered Agent signature and	ultipol white: reinstating)		
NAME STREET ADDRESS SW HIDDEN RIVER AVE 1.3 STREET ADDRESS 1.4 CITY - ST - 27P					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
STREET ADDRESS S98 S W HIDDEN RIVER AVE	TITLE	PST	☐ DELETE	1. 1 TITLE	☐ Change	■ Addition	
CITY-SI-ZIP	NAME	ZAMBO, RICHARD A		1.2 NAME			
TITLE	STREET ADDRESS	598 S W HIDDEN RIVER AVE		1.3 STREET ADDRESS			
NAME STREET ADDRESS SAME SAME STREET ADDRESS SAME SAME STREET ADDRESS SAME SAME STREET ADDRESS SAME SA	City-St-ZiP	PALM CITY FL		1.4 CITY-ST-ZIP			
STREET ADDRESS	TITLE	D	☐ DELETE	2 1 TITLE	☐ Change	Addition	
CITY - ST - ZIP	NAME	ZAMBO, RICHARD A		2.2 NAME			
TITLE	STREET ADDRESS			2.3 STREET ADDRESS			
NAME	CITY-ST-ZIP	PALM CITY FL		2.4 CITY - ST - ZIP			
STREET ADDRESS 33. STREET ADDRESS	TITLE		□ DELETE	3 1 TITLE	Change	Addition Addition	
CTY-ST-ZPP	NAME			3 2 NAME			
TITLE	STREET ADDRESS			3.3. STREET ADDRESS			
NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS C-TY-ST-ZIP 4.4 GITY-ST-ZIP TITLE DELETE 5.1 TITLE Change AC NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP TITLE Change AC TITLE DELETE 6.1 TITLE Change AC	C-TY-ST-ZiP			3.4 CHY-ST-ZIP			
STREET ADDRESS 43 STREET ADDRESS 44 GITY-ST-ZIP TITLE Change AC	TITLE		DELETE	4. 1 TITLE	☐ Change	Addition	
C1Y-S1-7IP	NAME	•		4.2 NAME			
THILE DELETE 5 1 TITLE Change Ac NAME 52 NAME STREEL ADDRESS 53 STREEL ADDRESS CITY-ST-ZPP 54 CITY-ST-ZIP THILE DELETE 6 1 TITLE Change Ac	\$1REET ADDRES\$			4.3 STREET ADDRESS			
NAME 52 NAME STREET ADDRESS 53 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP TITLE DELETE 6 1 TITLE Change Ac	CiTY-ST-ZiP			4.4 CITY-ST-ZIP			
53 STREET ADDRESS 53 STREET ADDRESS	TITLE		☐ DELETE	5 1 TITLE	Change	Addition	
C-TY-ST-ZiP	NAME			5 2 NAME			
TITLE DELETE 6 1 TITLE Change AC	STREET ADDRESS			5.3 STREET ADDRESS			
	CITY-ST-ZIP			5.4 CITY - ST - ZIP			
NAME 62 NAME	TITLE		☐ DELETE	6 1 TITLE	Change	☐ Addition	
	NAME			6 2 NAME			
STREET ADDRESS 6.3 STREET ADDRESS	STREET ADDRESS			6.3 STREET ADDRESS			
C/TY-ST-ZIP 64 C/TY-ST-ZIP	CITY-ST-ZIP			64 CHY-ST-ZIP			

Country

81 Name

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84 City

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ermation supplied with this filing 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 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 13 if changed, or on an attachment with an address.