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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Aug 28 1997 8:00am

Secretary of State

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # \$25250

(9)

Principal Place	REET	Mailing Address 2077 13TH STREET SARASOTA FL 34237-2705			
SARASOTA FL 34237 SARASOTA FL 34237-2700 US US					
				3. Date incorporated or Qualified 01/15/1991	3a. Date of Last Report 04/04/1996
	lace of Business	2a. Mailing Address		4. FEt Number 65-0249156	Applied For
Suite, Apt.	#. elc.	26 Suite, Apt. #, etc.		03-0249 130	Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State	City & State		\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Žip	Country	8. This corporation has liability for in	
24	9. Name and Address of Cur		30	Florida Statutes 10. Name and Address of New Reg	Yes No
STENZEL, SCOTT C. B1 Name					
2077 13TH STREET			82 Street Addre	ess (P.O. Box Number is Not Acceptable	٨
SARASOTA FL 34237			5 SHOEL AGGIE	ass (F.O. Box Number is Not Acceptable	θ)
			83		
			84 City		85 Zip Code
44 0					FL ' '
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered					
"	m familiar with, and accept the ob	oligations of, Section 607.0505, Flor	rida Statutos.		
SIGNATURE	Signature, typed or printed name of registered	Sagent and tille if applicable (NOTE	Registered Agent signature require	d when reinstating)	DATE
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	D	☐ DELFTE	1,1 TITLE		☐ Change ☐ Addition
NAME	STENZEL, SCOTT C.		1,2 NAME		
STREET ADDRESS	2077 13TH STREET		1.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL	Delete	1.4 CITY - ST - ZIP		
TITLE		☐ DELETE	2.1 1ITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2 3 STREET ADDRESS		
CITY-ST-ZIP TITLE	·	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME		L.J better	3.1 THEF 3.2 NAME		Li Anango Li Appillori :
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		1
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		·
STREET ADDRESS	i I		4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 City - ST - ZiP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP		ITT DELEVE	5 4 CITY-ST-ZIP		
TITLE		DELETE	61 TITLE		Change Addition
NAME BEREET LEBRESON			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

14. I do hereby 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 of 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.