FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

TIMUC	MENT # \$282° D, INC.	12 (6)					
Principal Place	of Business	Mailing Address				IN ALDI OFBIF DISH BIBII	BION BION BION (CO)
POST OFFICE BOX 884 LAKE PLACID FL 33852 POST OFFICE BOX 8 LAKE PLACID FL 33852							
					3. Date Incorporated or Qualified 01/28/1991	3a. Date of Last 05/01/	
2. Principal Place of Business 2a.		2a. Mailing Address 26	Mailing Address		4. FEI Number 59-3049503	-	Applied For Not Applicable
Suite, Apt. #, etc. 27		Suite, Apt. #, etc.	¬		5. Certificate of Status Desired		75 Additional e Required
City & State		City & State			6. Election Campaign Financing		00 May Be
3 Zip	Country	28	Count	ry	Trust Fund Contribution 8. This corporation has liability for in	AQ	ded to Fees s 199.032,
4	25 9. Name and Address of Currer	29 nt Registered Agent	30		Florida Statutes X Yes 10. Name and Address of New Re	□No	
			8	1 Name	To. Hance and Advices of New York	sgistered Agent	
	RS, JOHN W.		8	2 Street Add	dress (F.O. Box Number is Not Acceptable	0)	
	KE HUNTLEY DR.				Address (1.0. Dox Nethbor is Not Addeptadio)		
LAKE F	PLACID FL 33852		8	3			
			8-	4 City		85	Zıp Code
ianilikat Will	in and accept the obligations of sect	tion 607.0505, Florida Statute	S.	portinor a poo	pration submits this statement for the purp and of directors. Thereby accept the appo	TO TO BOTTO BOTTO BOTTO	bo agont. ram
SIGNATURE:	Signature, typed or printed name of registered agent	and tife Lappicalৰ (প	S. DTE: Bugistered Ag		ોડી પ્રશેભ માર્કેલ કરોલા કરવાનું .	DATE	
SIGNATURE		and title Lappicable (N D DIRECTORS	OTE: Registered Ag	ont signature require	••	DATE CERS AND DIRECT	TORS IN 12
SIGNATURE 5	Signature, typed or printed narric of registered agent OFFICERS AN	and tife Lappicalৰ (প	OTE: Registered Ag	ont signature require	ોડી પ્રશેભ માર્કેલ કરોલા કરવાનું .	DATE	TORS IN 12
SIGNATURE SIGNAT	Strature, typed or printed name of registered agent OFFICERS AN D LANDERS, JOHN W. 115 LAKE HUNTLEY DR.	and title Lappicable (N D DIRECTORS	S. OYE: Registered Ag 13. 1.1 THUS 1.2 NAME	ont signature require	ોડી પ્રશેભ માર્કેલ કરોલા કરવાનું .	DATE CERS AND DIRECT	TORS IN 12
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eath; 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 charged, or on an attachment with an address.

SIGNATURE:

John W Jan Ham John is Law Clay S
MANATURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR