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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

FILED Apr 21 1997 8:00am Secretary of State

	т.							
					3. Date Incorporated or Qualified 03/05/1991		3a. Date of Last Report 05/20/1996	
2. Principal Piace of Business		2a. Mailing Address			4. FEI Number			plied For
21		26				529		ot Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.	 1				\$8.75 A	
22 City & State	θ	City & State	City & State					
23	•	28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country	Ζφ	· · · · · · · · · · · · · · · · · · ·		8. This corporation has liability for intangible tax under s. 199.032,			
24	25 29		30			Yes		
100	9, Name and Address of Cur	rent Registered Agent	81	Name	10. Name and Address of New F	egistered	Agent	
	rdan, Pamela S. W. Bay St.						····	
	APA FL 33606		82	Street Addr	ess (P.O. Box Number is Not Accepta	able)		
			83					
•			84	City			85 Zip (Code
						FL	_ ` `	
office or n agent. I a SIGNATURE					oration submits this statement for the ion's board of directors. I hereby acc		pointment as	registered
12.	Signature, typed or printed name of registered		TE Registered Ag	gont signature requir	red when reinstaling) ADDITIONS/CHANGES TO OFF	DATE	D DIRECTOR	S INI 12
TITLE	OFFICERS AND DIRECTORS DELETE		1,1 TITLE		ADDITIONS/CHANGES TO OFF	IOLIIO AIV	Change	Addition
NAME	JORDAN, PAMELA S.		1.2 NAME)				
STREET ADDRESS	703 W. BAY ST.		1.3 STREE	T ADDRESS				
CITY-ST-ZIP	TAMPA FL		1.4 C(TY-	ST-ZIP				
TITLE		☐ DELETE	2.1 TITLE	}			L Change	Addition
NAME			2.2 NAME					
STREET ADDRESS	³]			T ADDRESS	•			
CITY-SY-ZIP	DELETE		2 4 CHY- 3.1 TITLE	SI-IP			Change	Addition
NAME			3.2 NAME	·			change	
STREET ADDRESS			l l	T ADDRESS				{
CITY-ST-ZIP			3.4, CITY-	1				
TITLE	DELETE.		4.1 TRILE				Change	Addition
NAME			4. 2 NAME					
STREET ADDRESS				1 ADDRESS				
CITY-ST-ZIP		Пант	4.4 CITY - :	ST-ZIP			Change	Addition
TITLE		☐ DELETE	5.1 THLE				Change	Addition
NAME CORET ADDRESS			5.2 NAME					
STREET ADDRESS	1. 19 6. 1			T ADDRESS				1
TITLE		DELETE	5.4 CITY - 1 6.1 TITLE	91. Sh.			Change	Addition
NAME	1		6.2 NAME					
STREET ADDRESS			10	T ADDRESS				
CITY-ST-ZIP			6.4 CITY - 1					
	by certify that the information supp	lied with this filing does not qua			in Section 119.07(3)(i), Florida Statu	tes. I furth	er certify that	the

information indicated on this about 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 of Block Tytichanged, or or an attainment with a applicass.

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