SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.

AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1006

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DOCUI	MENT # S3621	5 (9)					
	ASSOCIATES, INC.	· ,					
IIIL a	ASSOCIATES, INC.				I FÖRRVERA HER BEING GINGE HIRON FIRREI A	ini Anani Anani I	ANTO NIPATO REPOTO NOTAL LANDO
Dei- ei- ei De-	(D)						
Principal Place of Business Mailing Address						4:511 51611 5	ieni areni areni zizil (áé)
			6514 TANAGER STREET SARASOTA FL 34241				
ON THE STATE OF TH	L 47271	SARAGUIA PE 34241			Date Incorporated or Qualified	3a Dat	e of Last Report
					03/08/1991	1	20/1995
2. Principal Place of Business 2a. Mailing Address				4. FEI Number		Applied For	
21 25 25					65-0248550		Not Applicable
22 27					5. Certificate of Status Desired		\$8.75 Additional Fee Required
City & State City & State			••—	6. Election Campaign Financing	———	\$5.00 May Be	
23		28			Trust Fund Contribution		Added to Fees
Zip 24	Country 25	Zip 29	Cour 30	itry	This corporation has trability for Florida Statutes	intangible y Yes	w under s 199 032, No
	9. Name and Address of Curre		30		10. Name and Address of New Re		
LUK	CE, RUSSELL KENT		[+	B1 Name			
651	4 TRANAGER ST.		ļ	82 Street Add	ress (P.O. Box Number is Not Acceptab	ole)	
SARASOTA FL 34241			<u> </u>	83			
			ļ.		·		
			['	B4 City		FL	85 Zip Code
11. Pursuant to	to the provisions of Sections 607.05	02 and 607.1508 Florida Statue of Florida Such change was	ites, the abo	ve-named corp	poration submits this statement for the pion's board of directors. I hereby accep	urpose of cl	nanging its registered
agent Lai	m familiar with, and accept the obli	gations of, Section 607.0505, F	lorida Statut	es.	is to brain or director of this telly accept	t are appear	ariorit its regist. Vo
SIGNATURE	Signature, typed or printed name of registered a	genrand file if applicable (Ne	OTE Bog stered	Agent's gnature requi	red when renstating)	DAFS	
12.	OFFICERS AND DIRECTORS		13		ADDITIONS/CHANGES TO OFFI	CERS AND	DIRECTORS IN 12
TITLE	D	 -				L.	DIRECTORS IN 12 Software Addition: Software Additio
NAME STREET ADDRESS	LUCE, RUSSELL KENT 6514 TANAGER ST.		1 2 NAM	EEF ADDRESS			8
CITY-ST-ZIP	SARASOTA FL		1	r-Sr-ZiP			22E
TITLE	D	DELETE 21					Change Addition
NAME	LUCE, CHARLOTTE		2 2 NAM	/E			
STREET ADDRESS	6514 TANAGER ST.			2 3 STREET ADDRESS			
City - ST - ZIP Title	SARASOTA FL DELETE			2 4 CITY - ST - ZIP Chang		Change Addition	
NAME			3 2 NAM	·		L	
STREET ADDRESS			3 3 STR	EE1 ADDRESS			
CITY - ST - ZIP		DECETE		Y - ST - ZIP			Tobal
TITLE NAME		DELETE	4 1 TIFL 4 2 NA			L_	Change Addition
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CITY-ST-ZIP				r - ST - ZIP			
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NAME			5 2 NAM				
STREET ADDRESS				EET ADDRESS			
E/TY-ST-ZIP TITLE		DELETE	6 1 TITL	Y · ST · ZIP .E		Т	Change Addition
NAME			6.2 NAM			<u></u>	
STREET ADDRESS			6 3 STR	SET ADDRESS			
CITY-ST-ZIP	a coeffe that the information are a	and with the filips to subserve 1 - 2	6 4 CIT	Y-ST-ZIP	State the events of the Co.	77878	

I do hereby certify that the information 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or or set attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/24/96 941-925-8755