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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # C28861

(8)

1. Corporation		` '			
Principal Place	of Business	Maring Address		1 10 05:018 100 0110 10510 10110 001	OT STAT OFFICE BEALL ASALS AIRS AIRS DEALL INDS
6695 N. US 1 VERO BEACH FL 32967 US		6695 N. US 2 UNIT 2 VERO BEACH FL 32967 US			
				Date Incorporated or Qualified     03/19/1991      FET Number	3a. Date of Last Report 05/01/1995
Principal Place of Business 21		2a. Mailing Address	2a. Mailing Address 26 Ge 95 N US 1		Applied For Not Applicable
Suite, Apt #, etc.		Suite, Apt. #, etc.		65-0245612  5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State  28 Vero Sea	.cu Fl	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
<b>23</b> Zip	Country	28 YCYO (360 2p 29 3つ967	Country 30 Indian River	8. This corporation has liability for	
24	9. Name and Address of Curr		30 .1. (2.7)	10. Name and Address of New	
KRUGER, BRIAN D. 6980 77TH STREET VERO BEACH FL 32967			82 Street Addre  83 City	ass (P.O. Box Number is Not Accepta	FL 85 Zip Code
or register familiar wit SIGNATURE	ed agent, or both, in the State of Fil h, and accept the obligations of, So Squatze trest a proted state of representa-	lorida. Such change was autho ection 607.0505, Florida Statul	rizeri biy the comporation's board	d of directors. Thereby accept the app	urpose of changing its registered office pointment as registered agent. I am DATE FICERS AND DIRECTORS IN 12
TITLE	D	☐ DELET€	1 1 TITLE		Change Addition
NAME	KRUGER, BRIAN D.		1.2 NAME		
STREET ADDRESS	6980 77TH STREET		L 3 STREET ADDRESS		
CITY-ST-ZIP	VERO BEACH FL		14 CITY ST ZIP		
TITLE	D	☐ DELETE	2 1 T/TLE		Change Addition
NAME	KRUGER, JULIA LYNN		2.2 NAME		
STREET ADDRESS	6980 77TH STREET		2.3 STREET ADOMESS		
CITY-ST-ZIP	VERO BEACH FL	[] DELETE	24 CHY+ST-7P 3.1 THUE		Change Addition
TITLE			3 2 NAME		_ shange harmon
NAME STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY - ST - ZIF		
TITLE		DELETE	4 1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP			4 4 CITY - S1 - ZIF*		
TITLE		☐ DELF16	5 1 Trīle		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-SI-ZIP			5.4 CiTY - S1 - ZiP		
TITLE		☐ DELETE	6 17111.6		Change Addition
NAME			€ 2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6 4 CITY - ST - ZiP		0.000.00

14. 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 trusted 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 on an attachment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE:

SIGNATURE:

Chapter 607 Supplemental annual report of supplemental annual report is true and docurate 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 or Block 13 if changed on the receiver or trusted 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 on the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes. I further certify 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, I further certify 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, I further certify 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, I further certify that I am an officer or director or trusted empowered to execute this report as required by Chapter 607, Florida Statutes, I further certification of the co

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