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

PROFIT **CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUN TREMCO	MENT # <b>S40647</b> D, INC.	(7)			ANIN ANN DIAN INNI ANNI ANNI ANNI ANNI
Principal Place	e of Business	Mailing Address	γ		BIBIT BIBIT BIBIT BIBIT BIBIT BIBIT IDDI
2431 ÁLOMA AVENUE WINTER PARK FL 32792		2431 ALOMA AVENUE WINTER PARK FL 32792-25	40		
				3. Date Incorporated or Qualified 03/21/1991	3a. Date of Last Report 05/01/1996
<del></del> -	lace of Business	2a. Mailing Address	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4. FEt Number	Applied For
Suite, Apt.	# ofc	Suite, Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·	59-3065045	Not Applicable
22	w, 610.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	9	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country 25	Zip 29	Country 30	B. This corporation has liability for in	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Reg	jistered Agent
	LING, DALE D.		81 Name		į
2491 ALOMA AVENUE			82 Street Address (P.O. Box Number is Not Acceptable)		
WIN	ITER PARK FL 32792		63		
			84 City		FL 85 Zip Code
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	s, the above-named co	rporation submits this statement for the p ation's board of directors. I hereby accep	urpose of changing its registered
agent. I a	m familiar with, and accept the obliga	tions of, Section 607,0505, Flor	rida Statutes	ation's board of directors. Thereby accep	tine appointment as registered
SIGNATURE	Signature, typed or printed name of registered ager	t and tills if anylook is a till the t	: Registored Agent signature requ	uland who evaluation	DATE
12.	OFFICERS AND		13,	ADDITIONS/CHANGES TO OFFIC	
TITLE	DPS	DELETE	11 THYLE		☐ Change ☐ Addition
NAME	HELLING, DALE D.		1.2 NAME		•
STREET ADDRESS	2431 ALOMA AVE		1.3 \$TREET ADDRESS		
CITY-ST-ZIP	WINTER PARK FL 32792	DELETE	1.4 CITY - ST - ZIP		Observed Collectivities
TITLE	HELLMA DALED	L. DECETE	2.1 1171.6		Change Addition
NAME STREET ADDRESS	HELLING, DALE D. 2431 ALOMA AVE		2.2 NAME 2.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER PARK FL 32792		2. 4-CiTY-ST-ZIP		
TITLE	THE OLIVE	DELETE.	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 \$TREET ADDRESS		
CITY-ST-ZIP			3.4. DITY-ST-ZIP		
TITLE "		☐ DELETE	4.1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CHY-ST-7IP 5.1 TITLE		Change Addition
NAME		<b>—</b>	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 QITY - \$1 - ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

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 or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

**FILED** 

May 16 1997 8:00am

Secretary of State