ANNU	PROFIT IPORATION JAL REPORT 1996	FLORIDA DEPAF Sandra E Socreta	S \$225.00 RIMENT OF STATE 3. Mortham iry of State CORPORATIONS		
1. Corporation	MENT # S443 ROBINSON PRODUCTION				
Prine pal Place 765 DEL OR SAFETY HAR		Mailing Address 765 DEL ORO DR SAFETY HARBOR FL 34	4695	Addition III and allow and and all state of Last Report	1
				03/01/1991 04/19/1995	
2. Principal Pa 21	ace of Business	2a. Mailing Address [26]		4. FEI Number Applied For 59-3053537 Not Applicable	
Suite Apt.	#, etc.	Suite. Apt. #, etc. 27		5. Certificate of Status Desired S8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	1
Zip	Country	Ζφ	Country	B. This corporation has liability for intangible tax under s 199.032, Fiorida Statutes Yes No	╶┤
24	25 9. Name and Address of Curr	29 ent Registered Agent	30	10, Name and Address of New Registered Agent	
ROBINSON, EDWARD C.			81 Name	ddress (P.O. Box Number is Not Acceptable)	_
765 DE	l oro dr			ddress (P.O. box Number is Not Acceptable)	_
SAFETY	(HARBOR FL 34695		83		
			84 City	FL ⁸⁵ Zip Code	
or teaster	red arrent, or both, in the State of Eld	irida. Such change was authorized	s, the above-named cor	FL 85 Zip Code poration submits this statement for the purpose of changing its registered officionard of directors. I hereby accept the appointment as registered agent. I am	e
or teaster	red agent, or both, in the State of Fic th, and accept the obligations of, Se	irida. Such change was authorized clion 607.0505, Florida Statutes.	s, the above-namod cor d by the corporation's b	poration submits this statement for the purpose of changing its registered office loard of directors. I hereby accept the appointment as registered agent. I am	
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