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

1	1996		DIVISION OF CORPORATIONS			
DOCUN 1. Corporation	/ENT #	S52951	(8)			
STEP	hen e. Bisho	P, INC.			 	DI BIRBI IIRI BIRII RIBIN BIRIN BIRIN BIRIN BIRIN BIRIN
Principal Place	of Business		Mailing Address			
1224 FIRST AVE N JACKSONVILLE BEACH FL 32250			1224 FIRST AVE N JACKSONVILLE BEACH FL 32250			
					 Date Incorporated or Qualifie 05/14/1991 	3a. Date of Last Report 04/17/1995
2. Principal Place of Business 2 21 26			a. Mailing Address		4. FEF Number 59-3076093	Applied For Not Applicable
Suite, Apt. #, etc. 22			Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State			City & State		6. Election Campaign Financing	\$5.00 May Re
23 Zip	Cor	intry 28	B 	Country	Trust Fund Contribution	Added to Fees for intangible tax under s 199.032,
24	25	29]	30	Florida Statutes 🔲 🗅	Yes No
	9, Name and Ad	dress of Current Reg	istered Agent	81 Name	10. Name and Address of New	w Registered Agent
	AND, W. THOMA	S		82 Street	Address (P.O. Box Number is Not Accep	otable)
	THIRD ST SOUTH			83	<u></u>	
	ONVILLE BEACH	FL 32250		84 City		85 Zip Code
		407 65 65				FL
or registere	d agent, or both, in:	the State of Floridal Sc	ich change was autriori.	red by the corporation's	orporation submits this statement for the s board of directors. Thereby accept the a	purpose of changing its registered office appointment as registered agent. I am
SIGNATURE	i, and accept the or	iligations of Section 60	27.0505. Florida Statute	S.		
	gratue typed or protecti	Action of registered paint and the		DE Bagratine I Agent segration		DATE
12.	PD	OFFICERS AND DIR	ECTORS DELETE	13.	ADDITIONS/CHANGES TO C	OFFICERS AND DIRECTORS IN 12 Change Addition
NAME	BISHOP, STE	EPHEN E.		1.2 NAME		Ondago Add bon
STREET ADDRESS	1031 14TH A			1.3 STREET ADDRESS		
CITY - ST - ZIP	JACKSONVIL	LE BCH FL		1.4 CITY - \$1 - 2iP		
TITLE			DELETE	2.1 THILE		☐ Change ☐ Addition
NAME				2.2 NAME		
STREET ADDRESS				2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE			☐ DELETE	2.4 City - St - ZiP		Change D Addition
NAME			[] pt.c.,	3 1 TITLE 3 2 NAME		Change Addition
STREET ADDRESS				33 STHEET ADDRESS		
CITY - ST - ZIP				3.4 CITY - ST - ZIP		
TITLE			DELETE	4 1 TITLE	. ,	Change Addition
NAME			_	4.2 NAMÉ		
STREET ADDRESS				4.3 STREET ADDRESS		
CITY - ST - ZIF				4.4.0/1Y+ST+ZIP		
TITLE			☐ DEFELE	5 1 THE		Change Addition
NAME				5.2 NAME		
STREET ADDRESS				5.3 STREET ADDRESS		
CITY-ST-ZIP	No. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.			54 CHY+ST-ZIP	<u></u>	
TITLE			☐ DELETE	6 1 TITLE		Change Addition
NAME				6.2 NAME		
STREET ADDRESS				6.3 STREET ACORESS		
CITY-ST-ZIP	certify that the infor	mation supplied with the	is fanci is voluntardo for	64 CFY - ST- 7P	 alify for the exemption stated in Section 1	19.07(3)/k) Florida Statutan Usuthar
certify that i eath; that I	the information indic am an officer or dire	ated on this annua' reg ector of the corporation	iort or supplemental ani	tua' report is true and as se empowared to execu-	curst of the exemption stated in Section 1 courate and that my signature shall have a te this report as required by Chapter 607	the same lega! effect as if made under
SIGNATI	URE: STE	PHENE BE	Shop ed name of signing office	Letty & B.	Thup 4-1-9	PL