FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY 19 AM 10:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S63930** **(9)**

1. Corporate Name
W.A.R.M. ENTERPRISES, INC.

Principal Place of Business
2972 KENILWICK DRIVE S
CLEARWATER FL 34621

Mailing Address
2972 KENILWICK DRIVE S
CLEARWATER FL 34621

DO NOT WRITE IN THIS SPACE

3. Date Incorporated / Qualified: 06/28/1991
3a. Date of Last Report: 04/13/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. # or P.O. — 22 / 27
City & State — 23 / 28
Zip — 24 / Country — 25 / Zip — 29 / Country — 30

4. FEI Number: 59-3073869 — Applied For / Not Applicable
5. Certificate of Status Desired [ ] $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution [ ] $5.00 May Be Added to Fees
8. This corporation has elected to be governed under s. 607.0505 Florida Statutes [ ] Yes [ ] No

9. Name and Address of Current Registered Agent
HARRISON, RANDALL J.
2972 KENILWICK DRIVE, S.
CLEARWATER FL 34621

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

11. Pursuant to the provisions of Section 607.0501, Florida Statutes, the undersigned corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. The name and address of the registered office and the name and address of the registered agent for service of process within the State of Florida are hereby accepted.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	HARRISON, RANDALL J.
STREET ADDRESS	2972 KENILWICK DRIVE S
CITY ST ZIP	CLEARWATER FL
TITLE	DT
NAME	HARRISON, MARY ETTA
STREET ADDRESS	2972 KENILWICK DRIVE S
CITY ST ZIP	CLEARWATER FL
TITLE	DVP
NAME	WATSON, WILLIAM L.
STREET ADDRESS	23 HARBOR LAKE CIR
CITY ST ZIP	SAFETY HARBOR FL
TITLE	DS
NAME	WATSON, RANDI L.
STREET ADDRESS	23 HARBOR LAKE CIR
CITY ST ZIP	SAFETY HARBOR FL

13. ADDITIONAL OFFICERS AND DIRECTORS

14. I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same force and 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 above, or on an attachment with a title.

SIGNATURE: Randi L. Watson — 4/10/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
RANDI L. WATSON

0397743 CP