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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Moftham

NNA	rporation Ual report 1997		Secreta	B. Mortham ary of State CORPORATIONS	Secretary	y of Sta	ite
 Corporate 	MENT # S' OF R & OLD LACE		(0)		, 188(1818 10) 1880) 187(18 18) 18 (18)	81811 618 11 81811 81811 91811 1	***********
Principal Place of Business 1952 TIGERTAIL BLYD DANIE FL 33004 DANI A US		1952	ing Address TIGERTAIL BLVD A FL 33004-2106				
					3. Date Incorporated or Qualified 08/01/1991	3a. Date of Last R 03/15/1996	eport
	Place of Business	†ղ	Mailing Address	,	4. FEI Number 65-0280991	Ap	oplied For of Applicable
Suite Apt	# 6tc	[26]	iute, Apl. #, elc.		5. Certificate of Status Desired	\$8.75	Additional
22 City & Sta		27	City & State		6. Election Campaign Financing	Fee Re	equired
23		28		T- 6	Trust Fund Contribution	Added t	to Fees
Zip 24	25 9. Name and Add	ress of Current Registe	red Agent	Country 30	This corporation has liability for Florida Statutes Name and Address of New Re	Yes No	. 199.032,
110	rr, Shannon 50 SW 25 ST Je Fl 33324			B1 Name B2 Street Add	erer W. Metri dress (P.O. Box Number is Not Accepta	er Leg.	
				83 140	Royal Polm Was	, Suite,	2012
				84 City Q	Ja Jack	FI 85 20	Code 44 P D
	I to the proviscins of Se registered agent, or be am fam har and, and as	octions 607.0502 and 607 offi, in the State of Florida ocent the Obligations of S	m	ites, the above-named cor authorized by the corpora lorida Statutes.	poration submits this statement for the ation's board of directors. I hereby acce	purpose of changing it the appointment as 3 /12/9	Code 480 Is registered registered
SIGNATURE	Soprature typical actions and	W • W sow of registered agont and light in	applicable (NO	Ya	rporation submits this statement for the ation's board of directors. I hereby acce	3/12/9 DATE	7
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insurrange multimeter or this amount epoint or supplemental artifular report is true and accurate and that my signature shall have the same legal effect as if made under or hard another 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 12 or Block 13 if changed in on an attachment with an address.

FILED

Mar 17 1997 8:00am

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