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PROFIT CORPORATION ANNUAL REPORT



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

1996

S84491

(7)

DOCUMENT # 1. Corporation Name

Principal Place	Of Business												
15945 HANCO SARASOTA F	OCK RD.	15945 HANCO	Mailing Address 15945 HANCOCK RD. SARASOTA FL 34240										
							ate Incorpora 10/01/19		Qualified		ate of La 04/26		
2. Principal Pla	ace of Business	2a, Mailing Addr	ess				El Number				07/20/		Applied For
21		26					65-0290	155			ŀ		Not Applicab
Suite, Apt. #	#, etc.	Suite, Apt. #,	, etc.			5. Ce	ertificate of S	tatus De	esired		\$8		Additional
City & State		27 City 9 Chata											Required
23	,	City & State				1	ection Camp	-	•				May Be
Zip	Country	Zip	Co	untry			ust Fund Cor						to Fees
24	25	29	30	o.,,			nis corporatio prida Statute:	intangibie ∷ ∐No	tax und	ers	199.032,		
	9. Name and Address of Curr	ent Registered Agent		T			ame and Ad		of New F	Registere	d Agent		
				81	Name								
	/OOD, ROBERT T., (I			82	Street Addr	ress (P.O.	ess (P.O. Box Number is Not Acceptable)						
	NDY SHORE AVE.												
SAHASU)TA FL 34242			83									
				84	City						85	Zin	Code
11. Pursuant to	n the provisions of Sections 607 05	02 and 607 1509 Florida	Cestudes the sh	Щ						F			
or registere	o the provisions of Sections 607.05t ed agent, or both, in the State of Flo h, and accept the obligations of, Se	orida. Such change was a	authorized by the	corpo	named corpor oration's boar	ration stibr rd of <mark>direc</mark>	nds this state tors. I hereby	ement fo y accept	or the pu the app	rpose of c jointment a	hanging is registi	its re ered	egistered offi agent. I am
TANTHHIST WILL	n, and accept the obligations of, Se	KONOO KUZ OSOS. Florida S											
		7000 7007.0000, 1101iga (Statutes.										
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SIGNATURE			Diatoles.		t signature required	d who: reinsta	ətur <u>Q</u>)	IANGES		DATE	ID DIREC	CTO	RS IN 12
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SIGNATURE s	OFFICERS A DPS O'CONNORS, REGINA	ent and tille if applicable	(NOTE Registere:	d Agent		d who: reinsta	ətur <u>Q</u>)	IANGES		DATE			
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supplemental annual report is true and accurate and that my signature shall have the same logal effect as if made under deciver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name with an address. oath; that I am an officer or director of the corporation of the appears in Block 12 or Block in changed, or many an other or block in changed, or many an other or many and o

SIGNATURE: See

Regina A. O'Connors 4/8/96 941-322-1308