## 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

1996

DOCUMENT # S93905 (5)					
BRANJONA CORP.					
Principal Place of Business Mailing Address					
5251 MYRTLEWOOD		5251 MYRTLEWOOD			
SARASOTA FL 34235		SARASOTA FL 3423			
				3. Date Incorporated or Qualified	3a. Date of Last Report
		- · <del>-</del> - · - · - · - · - · - · - · - · - · -		11/14/1991	03/07/1995
k		2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.		65-0304439	Not Applicable  \$8.75 Additional
22		<u> </u>		5. Certificate of Status Desired	Fee Required
City 8 State		City & State		6. Election Campaign Financing	55.00 May Be
23	1	28		Trust Fund Contribution	Added to Fees
Zipi <b>24</b>	Country 25	Zip [29]	Country 30	8. This corporation has liability for in Florida Statutes  Yes	
	e and Address of Current			10. Name and Address of New Ro	<del>-</del>
			81 Name		
FRANKLIN, RALPH C. 82			82 Street Addre	ess (P.O. Box Number is Not Acceptable	9)
5251 MYRTLEW				· · · · · · · · · · · · · · · · · · ·	
SARASOTA FL 3	4235		83		
			84 City		85 Zip Code
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above pamed comporation submits this statement for the purpose of charging its registered office.					
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered again, or both, in the State of lorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, ark accept the obligation is of Section 607,0505, Florida Statutes.					
SIGNATURE & Just Mille					
Signature, types	seminated have of replayed agent a	The second rate was a second residence of the second	OTE: Registered Agent signature required		DATE
TILE DO	OFFICE RS AND	DIRECTORS  DELETE	13.	ADDITIONS/CHANGES TO OFFICE	CERS AND DIRECTORS IN 12  Change Addition
יון ו	KLIN, RALPH C.	Doctor	1 2 NAME		Change Addition
	MYRTLEWOOD		1.3 STREET ADDRESS		
I I	SOTA FL		1.4 CITY-ST-ZIP		
TIFLE STD		☐ DELETE	2 1 TITLE		Change Addition
AAME FRAN	KLIN, MARY E.		2 2 NAME		
	MYRTLEWOOD		2.3 STREET ADDRESS		
	SOTA FL	E BOLETC	2 4 CITY - ST - ZIP		
TILLE NAME		DELETE	3 1 TITLE 3 2 NAME		☐ Change ☐ Addition
STREET ADORESS			3.2 NAME 3.3 STREET ADDRESS	·	
CilY-SI-Zi⊬			3 4 CITY - ST - ZIP		
TITLE		DELETE	4.1 Title		Change Addition
NAME			4.2 NAME		
STREET ADORESS			4 3 STREET ADDRESS		
C(1Y-S1-Z(F		— Pricti	4.4 CITY - ST - ZIP		Change C Address
Tafi F Michael		DETEM	5 1 TITLE		Change Addition
NAME STEEL LADDRESS			5.2 NAME 5.3 STREET ADDRESS		
CITY - ST- ZIP			5 4 CITY - ST - ZIP		
Tills		DELETE	6 1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CHY-S1-ZIP			6 4 CITY - ST - ZIP		
14, 1 do nereby certify tha	tine information supplied w	ith this filing is voluntarily fur	nished and does not qualify fo	or the exemption stated in Section 119.6	77(3)(k), Florida Statutes. Hurther

certify that the information indicated that I am an officer or directly appears in Block 12 or Block