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 # V01430 (0)													
S & C ENTERPRISES, INC.													
Principal Place of Business Maling Address								[]	i ijeli viese ii	ile dali bibil	MPOOL AIMIT ALAI	ı Bilkil Bilki ibbi	
9256 DUNKIRK ROAD SPRING HILL FL 34808			9256 DUNKIRK ROAD Spring Hill Fl 34608										
					 —			3. Date Incorporated of 12/19/1991 4. FEI Number	or Qualified		te of Last Re 04/19/19		
			a. Mailing Address I				59-310924	6			lot Applicable		
21 26 Suite, Apt #, etc			Suite, Apt. #, etc.				5. Certificate of Status			\$8.75	Additional		
22 2							5. Germoate or Statos	1263/160			Required		
City & State			City & State					6. Election Campaign	_			May Be to Fees	
23			8 Zio Country				Trust Fund Contribution ha						
Zip 24	Country 25	29	Ζιρ	30	осын у			Florida Statutes	Yes	s M No			
	9. Name and Address of Curr		stered Agent	11			,	10. Name and Addres	ss of New I	Registere	d Agent		
					E 1	Na	ene						
DEMARS, SUSANNE G.				€ 2	St	reet Addre	ess (P.O. Box Number is N	lot Accepta	ble)		-		
9256 DUNKIRK ROAD				[83]									
SPRING	3 HILL FL 34608					<u></u>					· · · · · · · · · · · · · · · · · · ·		
					₹4	Ci	ty			F	L 85 Zip	o Code	
CICNIATUDE	o the provisions of Sections 607.05 ad agent, or both, in the State of Fic h, and accept the obligations of, Se Synatae tand or professionals of collected	eria i de 1	ayorata into	te Flog	derect Auto			rd of directors. Thereby ac		DA'F			
12.	OFFICERS A	ND DIRE	CTORS DELETE		13.			AUDITIONS/CHAN	GES TO OF	FICERS M		Addition	
TITLE NAME	D Demars, Susanne G.				1.2 NAME							—	
STREET ADDRESS	9256 DUNKIRK ROAD			- 1	13 STR E		RESS						
CITY-ST-ZIP	SPRING HILL FL 34608				1400 -								
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CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and coes not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes I further certify that the information indicated on this auritual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trusted 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, or on an attachment with an address.

SIGNATURE: SIGNATURE AND THE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 24, 1996 352-686-1411

CR2E034 (12/95)