| FILE NOW: FILING FEE AF PROFIT CORPORATION ANNUAL REPORT 1997 | | FLORIDA DEP/ Sandra Socret | \$550.00 ARTMENT OF STATE B. Mortham ary of State CORPORATIONS | FILED May 06 1997 8:00ar Secretary of State | |
|--|--|---|--|---|---|
| | | | -0941 | | |
| | | | | 3. Date Incorporated or Qualifi 01/15/1992 | ied 3a . Date of Last Report 05/14/1996 |
| 2. Principal Pla | ace of Business | 2a. Mailing Address | | 4. FEI Number | Applied For |
| 1 Suite, Apt. # | . elc. | 26 Suite, Apt. #, etc. | | 59-3106469 | Not Applicable \$8.75 Additional |
| 2 | · · | 27 | | 5. Certificate of Status Desired | Feo Required |
| City & Stale | | City & State | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees | |
| Zip | Country | Zip | Oountry | 8. This corporation has liability | for inlangible tax under s 199.032, |
| 4 | 25 9, Name and Address of Currer | 29 nt Registered Agent | 30 | Florida Statutes 10. Name and Address of New | Yes No |
| 11. Pursuant to office or red | the provisions of Sections 607.050 | 2 and 607.1508, Florida Stat of Florida, Such change was | utes, the above-named coust authorized by the composite | rporation submits this statement for t | FL 65 210 0008 the purpose of changing its registered ccept the appointment as registered |
| | Signature, typed or printed name of registered ag | end aries fills if applicable (NG | ITL: Registered Agent signature requ | ured when reinstating) | the purpose of changing its registered ccept the appointment as registered |
| SIGNATURE 12. TITLE | Signalure, typed or printed name of registered age OFFICERS AN | | | ured when reinstating) | the purpose of changing its registered ccept the appointment as registered DATE FFICERS AND DIRECTORS IN 12 |
| SIGNATURE 12. TILE NAME STREET ADDRESS | P ROBBINS, PRISCILLA R 7 REGENCY PARK DRIVE | ent ænd filk, if applicable (NG ID DIRECTORS | ITT : Rog stored Agent signature requ 19. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS | ured when reinstating) | the purpose of changing its registered ccept the appointment as registered DATE FFICERS AND DIRECTORS IN 12 |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY - ST- ZIP TITLE NAME STREET ADDRESS | P ROBBINS, PRISCILLA R 7 REGENCY PARK DRIVE MARY ESTHER FL 32569 S ROBBINS, PHILLIP F 7 REGENCY PARK DRIVE | ent ænd filk, if applicable (NG ID DIRECTORS | ITE: Rog stored Agent signature requ 13. 1.1 II/LF 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS | ured when reinstating) | the purpose of changing its registered ccept the appointment as registered DATE FFICERS AND DIRECTORS IN 12 |
| SIGNATURE 12. 111LE VAME STREET ADDRESS CITY-ST-ZIP 111LE VAME STREET ADDRESS CITY-GT-ZIP 111LE VAME STREET ADDRESS | P ROBBINS, PRISCILLA R 7 REGENCY PARK DRIVE MARY ESTHER FL 32569 S ROBBINS, PHILLIP F | end and fille if any locatile (NG ID DIFRE CTORS DELETE | ITT : Roy started Agent signature requ 13. 1.1 THLE 1.2 NAME 1.3 STHEET ADDRESS 1.4 CITY-S1-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS | ured when reinstating) | the purpose of changing its registered ccept the appointment as registered DATE FFICERS AND DIRECTORS IN 12 Change Addition |
| SIGNATURE SIGNATURE SI 12. 111LE VAME STREET ADDRESS CITY-ST-ZIP 111LE VAME STREET ADDRESS CITY-ST-ZIP 111LE VAME STREET ADDRESS CITY-ST-ZIP 111LE VAME STREET ADDRESS | P ROBBINS, PRISCILLA R 7 REGENCY PARK DRIVE MARY ESTHER FL 32569 S ROBBINS, PHILLIP F 7 REGENCY PARK DRIVE | D DIRECTORS | ITT: Bog stored Agent signature requ 13. 1.1 HUE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME | ured when reinstating) | the purpose of changing its registered CCEPT the appointment as registered DATE |
| SIGNATURE SI 12. 111LE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | P ROBBINS, PRISCILLA R 7 REGENCY PARK DRIVE MARY ESTHER FL 32569 S ROBBINS, PHILLIP F 7 REGENCY PARK DRIVE | Childred fills if applicable (NA ID DHIFE CTORS DELETE DELETE DELETE DELETE | 11: Rop starod Agent signature requirement 13: 1.1 THLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-S1-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-S1-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4, CITY-S1-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS | ured when reinstating) | the purpose of changing its registered CCEPT the appointment as registered DATE IFFICERS AND DIRECTORS IN 12 Change Addition Change Addition |