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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

Apr 04 1997 8:00am
Secretary of State

DOCUMENT # V08362						3. Date Incorporated or Qualified 3a. Date of Last Report					
•								 Date Incorporated or Qualified 01/21/1992 		12/1996	вроп
	. Principal Place of Business			2a. Mailing Address			4. FEI Number		-	oplied For	
Suite, Ap	 L.#. etc		26	Suite, Apt. #, et	tc.			65-0307700			ot Applicable Additional
2			27	# (· #- · · · · · · · ·				5. Certificate of Status Desired			equired
City & St	ite		h.—	City & State				6. Election Campaign Financing			May Be
Z ip		Country	28	Zip	1 0	Country		Trust Fund Contribution			to Fees
[4]		25	29	* h,	30	ош пу		 This corporation has liability for Florida Statutes 		tax uncers ∐No	. 199.032,
		e and Address of	Current Regist	ered Agent				10. Name and Address of New I	Registered	Agent	
	SH, WAYNE					81	Name				
		BOLA CIRCLE E SHORES FL 33	MAR.53AR			82	Street Add	fress (P.O. Box Number is Not Accept	table)		******
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		sions of Sections 6 igent, or both, in the with, and accept the	07 0502 and 60 e State of Florid e obligations of,	07.1508, Florida la Such change Section 607.05	Statutes, the e was authori 505, Florida S	above ized by Statutes	City e-named cor the corpora	poration submits this statement for the tition's board of directors. I hereby acc	e purpose of cept the app	.]] `	ts registered registered
11. Pursuar office o agent 1 SIGNATURE		ea or printed narw of regist		l applicable	(NOTE: Regist	above ized by Statutes	e-named cor the corpora	poration submits this statement for the statement for the station's board of directors. I hereby accurate when reinstating) ADDITIONS/CHANGES TO OFF	e purpose of cept the app DATE	changing i	
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information indicated on this annual 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 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, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED JAME OF SIGNING OFFICER OR DIRECTOR