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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

FILED Apr 16 1997 8:00am Secretary of State

DOCUM	1997		COD 85 12	r l	DIVISION OF C	CORPOR	RATIONS					
1. Corporation JAMES N	Name	# V21 NEY, P.A.	250		(8)				T FROM BUILT HOUR HOUR HEART BUILT BE		hidia didika didika	aran laa
Principal Place	of Busines	· · · · · · · · · · · · · · · · · · ·	,	Mailing Ad	idress	,						
2009 N. ORLEANDER AVE				-2009 N. OLEANDER AVE.								
#17 ⁻												
daytona b eac Us	H FL 92118	<u></u> -		DAYTONA (BEACH FL 3211	6-3267				T. 5	-4414 D	
US				Ųð					3. Date Incorporated or Qualified 03/13/1992		ate of Last R 01/1996	eport
2. Principal Pla			^	2a. Mailing	_		00		4. FEI Number		Ap	plied For
73		umn Wo	od Tr.		.O. 130	>X	874		59-3110741			t Applicable
Suite, Apt.# ∷1	e, etc		١	h	Apt. #, etc.				5. Certificate of Status Desired		\$8.75 A	
City & State				27 City & 5	State				Election Campaign Financing		\$5.00	<u> </u>
3 Orm	- 1	Beach.	゛゚゚゠゚	28	Sucom'	Be	ach, F	:1	Trust Fund Contribution		Added 1	
Zip		Country		Zip		Co	untry		8. This corporation has liability for		tax under s	199.D32,
4 321		25 U.S			175	30	<u>J.S.A.</u>				□ No	
		and Address o	of Current P	Registered A	gent		-		10. Name and Address of New R	egistered	Agent	
	ENEY, JAN						81 Name					
2609	N. ORLE	WIDER AVE	•				82 Street A	ddge	ss (P.O. Box Number is Not Accepta	ble)		
#17 -								<u>) 3</u>	Autumn wood	Trai	<i></i>	
DAYT	ONA BEA	OH FL 32118					83					
							84 City				85 Zip (Code
							Cuy C	ント	mand Beach	FL		3.174
11. Passant to	o the provis	ions of Sections	s 607.0502 a	and 607.1508	, Florida Statut	es, the				purpose o	changing it	s registered
office or re	:Qistered a <u>q</u> n familiar w	gent, or both, in the and accept	the State of the obligation	Florida, Such ons of Section	n change was a in 607 0505. Fli	authoriza orida Str	ed by the corp states	oratio	on's board of directors. I hereby acce	ept the app	pointment as	registered
	11 ((,)) ()) ()	ias, and accept	the english	0110 011 000101		01,000 01.						
SIGNATURE	ament de Rees											
		to proted name of n	ag-stereo agent a	ano title if applicabl	ile. (NOT	E: Reg ster	ed Agent signature i	required	d when reinstating)	DATE		
12.			og-stereo agent a CERS AND [E Register		required	d when reinstating) ADDITIONS/CHANGES TO OFF			
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Innormation in decanes on the amenan report or supplemental aminual report is true and accurate ano that my signature shall have the same required so 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 Brock 12 or Block 13 if changed, or on an attachment with an address.

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