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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

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ISABE	MENT # V226(LLE C. LANE, P.A.	65 (6)					
Principal Place	of Rucinees	Mailing Address			I FOULL OKARAT ALDIO TIONA DALLO PAR	UI AIII BÁGÁI BIDAR BÁDAI GAD	
1702 RICHAI	RD ERVIN PARKWAY RINGS FL 34689	1702 RICHARD ERVIN TARPON SPRINGS FL					
					3. Date Incorporated or Qualified 03/19/1992	3a. Date of Last R 04/11/19	
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number		Applied For
Suite, Apt. #		26			59-3111809		Not Applicable
2	, 610.	27			5. Certificate of Status Desired	1 1 7 7 7 7	Additional Required
City & State		City & State			Election Campaign Financing Trust Fund Contribution		O May Be d to Fees
<i>7</i> ıp ⊐	Country	Zip	Country		8. This corporation has liability for	·	199.032,
<u> </u>	25	29	30		<u></u>	No	
	9. Name and Address of Curre	nt Registered Agent	81	Name	10. Name and Address of New R	legistered Agent	<u>. </u>
LANE. I	SABELLE C.			_			
	ICHARD ERVIN PARKWAY		82	Street Addr	ress (P.O. Box Number is Not Acceptab	D(0)	
	N SPRINGS FL 34689		83				
			84	City		loc I 7	n Codo
			1 1	•			p Code
or registers	ed agent or both in the State of Flor	rida. Such change was authoriz	es, the aboverna	arneu corpor	ration submits this statement for the pur	pintment ne registered	Lagrant Lagra
taminar witi	n, and accept the obligations of, Sec	otion 607.0505, Florida Statutes	ed by the corpo		ration submits this statement for the pur and of directors. Thereby accept the appropriate the appropriate of the appropriate o	ointment as registered	l ågent. I am
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cath, 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 attachpant with an address.

IGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

D 4-4-96 813-934-3215'