FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANNUAL REPORT 1997			Secretary of State DIVISION OF CORPORATIONS				Secretary of State				
1. Corporation	MENT # V ILDERS, INC.	23569	(9)					Biğil Çiğil Bibli bi	18) 8 848 S1	8 () (28)	
Principal Place 1616 BENNETT ORLANDO FL	RD	161	Mailing Address 1616 BENNETT RD ORLANDO FL 32803-2469								
							3. Date Incorporated or Qualified 04/01/1992	3a. Date of 03/08/1		oorl	
2. Principa! P	lace of Business	2a.	2a. Mailing Address				4. FEI Number	1 001001		led For]
21		26					59-3118917	Not Applicable]
Suite, Apt	#, ets	[27]	Suite, Apt. #, etc.				5. Certificate of Status Desired		3.75 Ad Fee Requ		
Orty & State [23]	<i>;</i>	28	City & State				6. Election Campaign Financing Trust Fund Contribution		5.00 M Added to		
Z(p)	25 Cour	try 29	7 ip Counti				8. This corporation has liability for i	ntangible tax u] Yes No		99.032,	
	and the second second	ress of Current Regist	ered Agent				10. Name and Address of New Re	gistered Agen	ŧ		1
KISH	ł, PAUL J.				81	Name					ļ
	BENNETT RD				82	Street Add	dress (P.O. Box Number is Not Acceptab	le)		*****	1
ORL	ANDO FL 32803				83						1
								· · · · · · · · · · · · · · · · · · ·	T = = =		1
					84	City		FL 85	Zip Co	ode	Ì
office or r	egistered agent for bo rufahiliar with fand ac	oth, in the State of Florid recept the obligations of	a Such change was Section 607.0505, F	authorize Torida Sta	d by tutes	the corpora 3.	poration submits this statement for the pation's board of directors. I hereby acception	ot the appointm	iging its i	registered egistered	
12.		or of negative dagest and file of OF LICERS AND DIRECT)If Registere 13.	d Age	nt signature requ	lired which reinstating) ADDITIONS/CHANGES TO OFFICE	DATE SERS AND DIR	ECTORS	IN 12	1
Hr.F	PD	(2) 1 (2) (13) 2-3(1) (2) (3)	DELETE	1.111	TLE	<u> </u>	Additional virtues to at the			Addition	18
NAV:	KISH, PAUL J.			1,2 N	AME						1
STREET ADDRESS	1616 BENNETT F	RD O		1.3 S	TREET	ADDRESS					Ŕ
CITY-ST ZIP	ORLANDO FL		Placter			T-ZIP		· · · · · · · · · · · · · · · · · · ·		<u> </u>	٤
THE	 DADDANAODE DE	DIAN E	DELETE	211				[] \	Change	L_J Addition	ľ
NAME STREET ADORESS	PARRAMORE, BF 619 CARVELL DF			22 N		ADDRESS					l
SHY ST ZP	WINTER PARK FI					ST-ZIP					l
Blif			DELETE	3.1 7					Change	Addition	
NAM+				3.2 N	AME						
STREET ADDRESS.						ADDRESS					
C:Cy - S* 70*			DELFTE			St - ZiP			Change	Addition	1
TOLE NAME			C) pertie	4.1 Ti		1		L! \	many6	L.J ASSURED	1
SINE LADURESS						ADDRESS					
Cata Pt-A						1-ZIP					1
McF			DELETE	517					Change	Addition	
NAMI				5.2 N							
STREET ADECESS				1		ADDRESS					
CIY-ST ZIP			DELFTE			ST - ZIP			Change	Addition	-
TITLE NAME			LIbruit	6.1 Ti 6.2 N		1		ا ليا	willige	- J / MONOT	Ì
STREET ADORESS						ADDRESS					

64 CHY-SL-7IP

14. It do hereby centry that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the 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 other 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 of Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Mar 20 1997 8:00am