SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT

1996

SIGNATURE: _



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

(7)

MARVIN P. JACKSON, ATTORNEY, P.A.

***************************************	P. JAUNSU							
Principal Place of Business 205 W. DR. M.L. KING BLVD. SUITE 201 TAMPA FL 33603		Ma	Mailing Address			I INNER MININE MANAGEMENT IN	il Biffit Biffit Giftis Giftit Biffit Biffit fabi	
		SU	205 W. DR. M.L. KING BLVD. SUITE 201 TAMPA FL 33603			Date Incorporated or Qualified 3a. Date of Last Report		
							03/23/1992	05/01/1995
2. Principal Pla	ce of Business		2a.	Mailing Address			4. FEI Number	Applied For
]			26				59-2918325	Not Applicable
Suite, Apt. #	, etc.		27	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State			28	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May 8e Added to Fees
Zıp		Country		Zip	Coun	try	This corporation has liability for Plorida Statutes	intang-ble tak under si 199 032. □ Yes □ No
4	25	1 A d d	29	tored Aponl	30		10. Name and Address of New Re	
		d Address of Cur	rent Regis	tered Agent		1 Name	10.	
	KSON, MARV		*			10 00 00 00 00 00 00 00 00 00 00 00 00 0	ress (P.O. Box Number is Not Acceptab	
		king Jr. Blvd	l.		'	Street Addi	IIBSS (P.O. BOX NUMBER IS NOT Acceptate	
	E 201				Ī	33		
IAM	PA FL 33603	•			-	34 City		85 Zip Code
						1 '	poration submits this statement for the property accept	FL
agent Lan								
agent I an		unted name of legislero	d agent and title	dappicable (N			irad Aher reinstatin):	CERS AND DIRECTORS IN 12
SIGNATURE	Signature, typed or p	unted name of legislero		itapplicabe (N	13.	Agent signature recon	nrad ahearensuhrin): ADDITIONS/CHANGES TO OFF!	CERS AND DIRECTORS IN 12
SIGNATURE 12. TITLE	Signature, typed or p	ornted name of registero OFFICERS	d agent and title	dappicable (N	13.	Agent signature requi		CERS AND DIRECTORS IN 12
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SIGNATURE AND TYPEO OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR