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PROFIT CORPORATION ANNUAL REPORT



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

1996

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1. Corporation Name AMERICANA SALES VENTURES, INC. Principal Place of Business 1000 SUNSHINE LANE ALTAMONTE SPGS FL 32714 US (2) (2) (2) (2) (4) (5) (6) (7) (7) (8) (9) (9) (10					3. Date Incorporated or Qualified 3a. Date of Last Report			
					03/23/1992		04/26/1	995
2. Principal P	Place of Business	2a. Mailing Address 26			4. FEI Number 59-3123237		}	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			5 Additional
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution Trust Fund Contribution Fee Required \$5.00 May Be Added to Fees			00 May Be	
Ζφ 24	Country 25	Zip	Counti	ry	8. This corporation has liability for	r intangible :		ed to Fees 199.032,
	9. Name and Address of Currer	29 nt Registered Agent	30		Florida Statutes Ye 10. Name and Address of New	s □No Registered	Agent	
			8	1 Name				
	OLPH, TIMOTHY V.		8:	2 Street Add	dress (P.O. Box Number is Not Accepta	ble)		
	ake rena drive Wood FL 32779		8	9	<u>'</u>			
LONG	WOOD FL 321/8							
			84	4 City		FL	85 Z	ip Code
familiar w	ith, and accept the obligations of, Sect	ion 607.0505, Florida Statute	S.	poration's boa	oration submits this statement for the purific of directors. I hereby accept the appropriate the properties of the prope	pointment a	s registered	agent. I am
familiar wi SIGNATURE 12.	ith, and accept the obligations of, Sect Signature, typed or printed name of registered agent OFFICERS AN	and title flagolicable (N	S.	poration's boa	ard of directors. I hereby accept the app	DATE		
SIGNATURE 12. IIILE	Signature, typed or printed name of registered agent OFFICERS AN	and title flagolicable (N	S. OTE: Registered Ag	ent signature require	ard of directors. I hereby accept the application of directors.	DATE		
SIGNATURE: 12. TIFLE NAME	Signature, typed or printed name of registered agent OFFICERS ANI P RANDOLPH, TIMOTHY V.	ion 697.0505, Florida Statute and title flamilicable (N D DIRECTORS	S. OTE: Registered Ag 13. 1.1 TITLE 1.2 NAME	ent signature require	ard of directors. I hereby accept the application of directors.	DATE	D DIRECTO	DRS IN 12
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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: _ 🗷

NG OFFICER OR DIRECTOR