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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # MAZEO

/E\

Principal Place of Business Mailing Address B420 QUAIL RUN DR WESLEY CHAPEL FL 33544 CHEERS 54. INC. CHEERS 54. INC. 6152 CAROLINE DRIVE													
		WESLEY CHAPEL FL 33544-4141 US					3. Date Incorporated or Qualified						
Principal Place of Business 21			2a. Mailing Address 26					El Number 65-0347797			Applied For Not Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. (Certificate of Status Desired		\$8.75	Additional			
City & Stat	e		City & State				8. F	lection Campaign Financing			Required May Be		
23		28					rust Fund Contribution			d to Fees			
Zip 24	Country 25 9. Name and Address of Current			29 30			ountry		This corporation has liability for Florida Statutes	Yes	□ No	s. 199.032,	
WAL		· · · · · · · · · · · · · · · · · · ·	Registere	d Agent		81	Name	10, 1	Name and Address of New	Registered	Agent	N-1-1	
WHIPPLE, CHARLES A 6152 CAROLINE DRIVE						82		Street Address (P.O. Box Number is Not Acceptable)			,		
WESLEY CHAPEL FL 33544							Stiedt Add	Address (P.O. Box Number is Not Acceptable)					
						8 3			0				
						64	City			FI	85 Zip	o Code	
11. Pursuant	to the provisions of	Sections 607.0502	and 607.1	508, Florida Statur	es, the at	DOVE	-named cor	rporation	submits this statement for the ard of directors. I hereby acc	purpose (changing	its registered	
agent. La	im familiar with, and	accept the obligation	ons of, Se	ction 607.0505, FI	orida Stat	utes	ruse corpora S.	ation's bo	and of directors. Thereby act	eprine ap	pomment a	is registered	
SIGNATURE	Signature, typed or printed	name of registered agent (and title if acc	licable (NO)	E: Registered	1 Ann	nt signature requ	uired when re	ainstatino)	DATE			
12.		OFFICERS AND			13.				DDITIONS/CHANGES TO OF		D DIRECTO	PRS IN 12	
TITLE	PTD			☐ DELETE	1.1 717	TLE					Change	Addition	
NAME	•	RLES ANDREWS			1.2 NA	ME							
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CITY-ST-ZIP	WESLEY CHAP	EL FL		D britte	1.4 CH		T-ZIP				T 2.		
TITLE	VSD	ANI MADIE		☐ DELETE	21 111						Change	Addition	
NAME Proces apoptor	WHIPPLE, LILLIAN MARIE 8420 QUAIL RUN DR				2.2 NA								
STREET ADDRESS	WESLEY CHAP				2.3 STREET ADDRESS 2.4 City-St-Zip								
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STREET ADDRESS							address						
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NAME CIDEET ADODGEC					6.2 NA		1000000						
STREET ADDRESS					6.3 \$1	MLL!	ADDRESS						

SIGNATURE: LILLIAN M. WHIPPLE

14. I do hereby certify 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 officer or director of the corporation or the receiver or trustee empowered to execute this appears in Block 12 or Block 13 if changed, or on an attachment with an address.

FILED

Feb 21 1997 8:00am

Secretary of State