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

**CORPORATION ANNUAL REPORT** 1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # V67739

(5)

Mailing Address

R. J. BLOCK & ASSOCIATES, INC.

**FILED** Jul 23 1997 8:00am Secretary of State



2148 BLUE IRIS PLACE LONGWOOD FL 82179		2148 BLUE IRIS PLACE LONGWOOD FL 32779-3014				
					3. Date Incorporated or Qualified 09/28/1992	3a. Date of Last Report 11/07/1996
	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26	26			Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			59-3142074	\$8.75 Additional
22		27			5. Certificate of Status Desired	Fee Required
City & Stat	le	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country		8. This corporation has liability for in	tangible tax under s. 199.032.
24	25 29 30		30			Yes No
	9. Name and Address of Co	urrent Registered Agent			10. Name and Address of New Reg	istered Agent
BLO	ICK, ROBERT J.		8	Name		
	B BLUE IRIS PLACE			2 000000		
	IGWOOD FL 32779		8	Street Add	dress (P.O. Box Number is Not Acceptabl	e)
LON	IGHOOD FL SELTE		8:	3		
			L			
			8-	City		85 Zip Code
11 Dureupht	to the provisions of Sections 60	OFO2 and 607 1509 Florida Statut	no the ske	1 named se		FL 83 ZIP COOR
office or r	registered agent, or both, in the	State of Florida. Such change was a	es, the abo authorized b	ve-named cor by the corpora	rporation submits this statement for the parties alon's board of directors. I hereby accep	irpose of changing its registered : the appointment as registered
agent la	ım familiar with, and accept the o	obligations of, Section 607.0505, Fic	orida Statuti	es.	,	,,,
SIGNATURE						
40	Signature, typed or printed name of register-			gent signature requ	ured when reinstating)	DATE
12.		S AND DIRECTORS  DELETE	13.	<del></del>	ADDITIONS/CHANGES TO OFFICE	
TITLE	DOP	C DETELE	11 THTLE			Change Addition
NAME	BLOCK, ROBERT J.		12 NAME			
STREET ADDRESS	2148 BLUE IRIS PL		1.3 STREE	T ADDRESS		
CITY-ST-ZIP	LONGWOOD FL 32779		1.4 CITY-			
TITLE	D	☐ DELETE	2.1 TITLE		• •	Change Addition
NAME	BLOCK, SAMUEL R		2.2 NAME			
STREET ADDRESS	2419 DELTONA BLVD.		2.3 STREE	T ADDRESS		
CITY-ST-ZIP	SPRING HILLS FL 34808		2. 4 CITY	- ST - ZIP		
TITLE		DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS	3		3.3 STREE	T ADDRESS		
CITY-ST-ZIP			3.4. CITY	- ST - ZIP		
TITLE		DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME			4. 2 NAM	:		
STREET ADDRESS			4,3 STREE	T ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS	医线点 医水流		1	T ADDRESS		
CITY-ST-ZIP			1	1		
TITLE		☐ DELETE	5.4 CITY-	21 - EIP		☐ Change ☐ Addition
			6.1 TITLE			Li Charige Li Addillor
NAME OFFICE APPROVAGE			6.2 NAME			
STREET ADDRESS			6.3 STREE	T ADDRESS		
CITY-ST-ZIP			6.4 CITY	ST-ZIP		

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 applied 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 am an officer or director of the corporation or the receiver of the technique of the corporation or the receiver of the technique of the techni