ANN	CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS						
1. Corporation	IMENT # <b>V72</b> on Name TERNATIONAL, INC.	2318	(1)						
Principal Place of Business 608 PINE VILLAGE LANE NAPLES FL 33963		808	Mailing Address  808 PINE VILLAGE LANE NAPLES FL 33963			DO NOT WRI Date Incorporated or Qualified	TE IN THIS SP		
2. Principal P	lace of Business	2a. N	Mailing Address		_   1	0/15/1992 El Number		0/1994	
Suite, Apt.	* sto	26				5-0361834		<b>├-</b> -	Applied For Vot Applicable
22		27	uite, Apt. #, etc.		5. (	Certificate of Status Desired		\$8.75	Additional Required
City & Stat	e	28	ity & State			lection Campaign Financing		\$5.00	May Be
Zip	Country 25	Ž	—	Country	<b>8</b> . T	rust Fund Contribution his corporation has liability fo	r intangible tax	Added	to Fees
	9. Name and Address	29 of Current Register	ed Agent		1	lorida Statutes You Yame and Address of New	s [] No		
SIGNATURE _	to the provisions of Sections ed agent, or both, in the Statin, and accept the obligation	is of, Section 607,050	05, Florida Statutes. ⇔ble INOTE Registe	83 84 City  above-named corpor to corporation's boar		mits this statement for the putotors. Thereby accept the app	FL Impose of chan pointment as re		Code gistered office agent. I am
12. TIL.	OFF I	CERS AND DIRECTO	RS 13	3.		DDITIONS/CHANGES TO OFF		IRECTOR	IS IN 12
	PETZINGER, ROBERT J 808 PINE VILLAGE LAN NAPLES FL		12	1 TITLE 2 NAME 3 STREET ADDRESS			L	, ∫ Change	L. ∤ Addition
STHEET ADDRESS	S MORAN, CRISTINA 808 PINE VILLAGE LN NAPLES FL 36		21 22	I TITLE  NAME  STREET ADDRESS				Change	Addition
TILE NAME STREET ADDRESS	11 LEO 1 E 00		31 32	CITY-ST-ZIF* THILE NAME STREET ADDRESS			<u>-</u>	Change	Addition
ITY-ST-ZIP ITLE AME TREET ADORESS			4.1	CHY-ST-ZIP TITLE NAME STREET ADDRESS				Change	Addition
OTY+ST+20P TILE IAME TREET ADDRESS			51	CITY-ST ZIP TITLE NAME STREET ADDRESS				Change	Addition
ITY-S1-ZIF ITLE AME TREFT ADDRESS			5.4 6.1 6.2	CITY-ST-ZIP TITLE NAME STREET ADDRESS				Change	Addition
oath; that I	certify that the information s the information indicated on an an officer or director of t Block 12 or Block 13 if chan	he cornoration or the	6.4 is voluntarily furnished and supplemental armual report	City-St-ZiP I does not qualify for	r the exer e and tha report as	nption stated in Section 119 t my signature shall have the required by Chapter 607, Fic	same legal effe orida Statutes;	ect as if ma and that n	. I further ade under my name

SIGNATURE: