

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 6/1/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$875)

PROFIT CORPORATION ANNUAL REPORT 1995



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

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

95 JUL -3 AM 8:46

DOCUMENT # P92000013453 (5)

1. Corporation Name
AEDO ENTERPRISES, INC.

Principal Place of Business Mailing Address
2704 BEE RIDGE RD SARASOTA FL 34239 **2704 BEE RIDGE RD SARASOTA FL 34239**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified **12/17/1992** 3a. Date of Last Report **01/26/1994**

2. Principal Place of Business 2a. Mailing Address
 21 **12403 PAMPAS PLACE** 25 **12403 PAMPAS PLACE**
 Subt. Apt #, etc Subt. Apt #, etc
 22 City & State 27 City & State
TEMPLE TERRACE, FL **TEMPLE TERRACE, FL**
 Zip Country Zip Country
 24 **33617** 25 **USA** 29 **33617** 30 **USA**

4. FEI Number **65-0394804** Applied For Not Applicable
 5. Certificate of Status Desired **\$8.75 Additional Fee Required**
 6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

**HOWARD, ELLEN
 2704 BEE RIDGE RD
 SARASOTA FL 34239**

10. Name and Address of New Registered Agent

81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City 85 Zip Code
FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent (Typed name of registered agent and title in block letters) Signature of Registered Agent (Typed name of registered agent and title in block letters)

12. OFFICERS AND DIRECTORS

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PTD
NAME	AEDO, CESAR E
STREET ADDRESS	12403 PAMPAS PLACE
CITY, ST, ZIP	TEMPLE TERRACE FL 33617
TITLE	VD
NAME	AEDO, LISA J
STREET ADDRESS	12403 PAMPAS PLACE
CITY, ST, ZIP	TEMPLE TERRACE FL 33617
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

14 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
15 NAME	
16 STREET ADDRESS	
17 CITY, ST, ZIP	
18 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
19 NAME	
20 STREET ADDRESS	
21 CITY, ST, ZIP	
22 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
23 NAME	
24 STREET ADDRESS	
25 CITY, ST, ZIP	
26 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
27 NAME	
28 STREET ADDRESS	
29 CITY, ST, ZIP	
30 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
31 NAME	
32 STREET ADDRESS	
33 CITY, ST, ZIP	
34 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
35 NAME	
36 STREET ADDRESS	
37 CITY, ST, ZIP	

14. I, the undersigned, certify that the information required with this filing is voluntarily furnished and does not comply for the name(s) stated in Section 119.07(2)(b), Florida Statutes. I further certify that the information contained 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 person or person empowered to execute this report as required by Chapter 107, Florida Statutes, and that my name appears in Block 12 or Block 13 if checked, or name attachment with an address.

SIGNATURE: *Lisa J. Aedo* **LISA J. AEDO**
(SIGNATURE OF) TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/26/95 (813) 988-0171

CR2E034 (3/95)