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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

CHTY-ST-ZIP

P94000050396 (8) DOCUMENT #

appears in Block 12 or Block 13 if changed, or on an attachment with an address.

KERCHER INTERNATIONAL, INC. Principal Place of Business Mailing Address 2699 SEVILLE BLVD., UNIT 310 2699 SEVILLE BLVD., UNIT 310 CLEARWATER FL 34624 CLEARWATER FL 34624 3. Date Incorporated or Qualified 3a. Date of Last Report 07/06/1994 04/13/1995 2. Principal Place of Business Mailing Address 4. FEI Number Applied For 21 26 59-3271035 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees $Z_{\rm IP}$ $Z_{\rm ID}$ Country 8. This corporation has liability for intangible tax under s 199.032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name QUINLAN, JOHN V Street Address (P.O. Box Number is Not Acceptable) 82 233 15TH STREET WEST **BRADENTON FL 34205** 83 84 City Zip Code 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: eicher, President elane CR2E034 (12/95) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 THEF DELETE Change ☐ Addition MAME KERCHER, MELANIE B 1.2 NAME 2699 SEVILE BLV., UNIT 310 STREET ADDRESS 1.3 STREET ADDRESS **CLEARWATER FL 34624** CITY-ST-ZIP 1.4 CITY - ST-ZIP TITLE ☐ DELETE 2 1 TITLE ☐ Change ☐ Addition NAME 2.2 NAME STHEET ADDRESS 23 STREET ADDRESS CITY-SI-ZIP 24 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change Addition NAMI 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY - ST - ZIP TITLE DELETE 4. 1 TITLE Change ☐ Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CHTY-ST-ZIP 44 CITY - ST - ZIP TITLE DELETE 5. 1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE 6 1 TIFLE Change Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS

CICLEU Pres/Director 4-15-96 8137993522

6.4 CITY - ST- ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 cath; 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