COMMONWEALTH OF KENTUCKY JOHN Y. BROWN III, SECRETARY OF STATE ANNUAL REPORT

(See Reverse Side for Filing Instructions)

			(4) FILING FEE
RECORD #	U175591	DUE JUNE 30, 1 99 7	15.07
(1) EXACT CO	DRPORATE NAME AND PRINCIPAL (OFFICE ADDRESS:	
-	A. THUMAS, P.S.C.		
	ANEY WOODS RD.		
	SVILLE, KY. 40754		
	7 TELL 4 14 0 2 7	`	(5) STATE OR COUNTRY OF INCORPORATION
			КУ
		MAY 15 1997	
		6	
			(6) DATE OF INCORPORATION OR
(2) PRINCIPAL	OFFICE ADDRESS IS HEREBY CHANGE	D TO:	AUTHORIZATION TO TRANSACT BUSINESS
			^3/u=/1993
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(3) DEGISTEDS	ED AGENT AND REGISTERED OFFICE A	DDRESS: (7) PLEASE MA	ALL A STATEMENT OF CHANGE FORM TO:
(S) NEGISTERI	TO ROCK! AND ILLOIDICITED OF FOUR		
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	INGEPORT OR.	<u> </u>	
	N. KY. 40507		
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changes n'aue	See English, tonk on yourse side		
PLEASI	E TYPE OR PRINT THE NAMES AND BUS	SINESS ADDRESSES OF THE CORPORATIO	N'S CURRENT PRINCIPAL OFFICERS.
		IF SOLE OFFICER, PLEASE CHECK	
PRESIDENT			
VIOL DECIDE	AIT		
VICE PRESIDE	NT		
SECRETARY _			
TREASURER _			
THEADONEIT =			
D	PLEASE TYPE OR PRINT THE NAMES	and BUSINESS ADDRESSES OF THE COR on that the corporation has dispensed with the board of	PORATION'S DIRECTORS. of directors, Non-profit corporations must list three (3)
	See Filing Instructions on reverse side.	of that the corporation has dispenses with the source	()
BOARD OF			
		RT IS CURRENT AS OF THE DATE THIS REI	
AUTHORIZED :	SIGNATURE Thanks A Th	only TITLE OLUZI	DATE 4-24-57
PROFESSIONA	AL SERVICE CORPORATIONS ONLY. In a I shareholders of the professional service of	ddition to the annual report content requirement corporation and the president shall sign the ce	it, there shall be included a list of hames and rifficate below.
	CERTIFICATE	OF PROFESSIONAL SERVICE CORPORATION)N
I, Pre	sident of said corporation, do certify that all	If of the shareholders, not less than one half of ce corporation are duly qualified as provided in	rtne directors, and all officers other than KRS Chapter 274 and a copy of such annual
repor	t has been filed with the regulating board t	hat licenses the shareholders described in this	s statement.

بعثلال)

PRESIDENT'S SIGNATURE _