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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 630022

(2)

ALEXANDER G. PADEREWSKI, P.A.

maii	ing A	aaress	
1834	MALI	CTREET	

FILED Apr 21 1997 8:00am Secretary of State



SARASOTA FL				RASOTA FL 34236-591	2							
P ₂								3. Date incorporated or Qualified 07/19/1979	3a. Date of 02/08/19		eport	
	lace of Business	;	2a.	Mailing Address			·- · ·	4. FEI Number	02/00/10		plied For	
21			26					59-1925035		No	t Applicable	
Sulte, Apt.	#, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional	
22			27								bequired	
City & Stat	e		-	City & State				6. Election Campaign Financing			May Be	
23 Zip	 -	Country	28	Zip	Cou	intry		Trust Fund Contribution			o Fees	
24	25	Colling	29	2.15	30			8. This corporation has liability for intangible tax under s. 199.032. Florida Statutes ☐ Yes ☐ No				
		d Address of Cur		tered Agent	1001	· ·		10. Name and Address of New Re				
PAD	EREWSKI, ALE	XANDER G				81	Name					
	MAIN ST.				'	82	Street A	Address (P.O. Box Number is Not Acceptab	le)			
	ASOTA FL 342	:36										
						83	ı					
						84	City		85	Zip (Code	
							·		_ FL			
11. Pursuant office or r	to the provisions registered agent,	s of Sections 607.0 , or both, in the St	0502 and 6 ate of Florid	07.1508, Florida Statu da. Such change was f, Section 607.0505, F	utes, the al authorized acido Stat	bove d by	e-named of the corp	corporation submits this statement for the p oration's board of directors. I hereby accep	urpose of chan t the appointm	ging it ent as	s registered registered	
~	(((15()	and accept the ob	iligations of	1, 36CHOH 001.0303, T	ionda olai	utos	٠.					
SIGNATURE	Signature, typed or pr	inled name of registered	agent and tide	if applicable (NC	Olf Registere	d Age	nt signature t	required when reinstating)	DATE.			
12.		OFFICERS A	AND DIREC		13.			ADDITIONS/CHANGES TO OFFIC				
-TITLE 🦸	DP		_	DELETE	1.1 70	TLE			☐ C	range	☐ Addition	
NAME		I, ALEXANDER	G		1.2 N/							
STREET ADDRESS	1834 MAIN S				- 1		ADDRESS					
CITY-ST-ZIP	SARASOTA F	<u>"L</u>		DELETE	1.4 CI		T-ZIP		Пс		Addition	
TITLE NAME					21 T/ 22 N/		ľ			lariye	Authorn	
STREET ADDRESS					- I		ADDRESS					
CITY-ST-ZIP							AUDRESS ST-ZIP				ļ	
TITLE			·····	DELETE	3.1 Ti)1-Z(F			nange	Addition	
NAME					3.2 NA		- 1			-		
STREET ADDRESS					3.3 ST	REFT	ADDRESS					
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NAME					4. 2 N	AME						
STREET ADDRESS					4.3 ST	REET	ADDRESS				ŀ	
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NAME ,					5.2 N ⁴		1					
STREET ADDRESS							ADDRESS					
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TITLE				☐ DELETE	6.1 (1)		-		☐ CH	ange	Addition	
NAME					6.2 N/		1000000				1	
STREET ADDRESS							ADDRESS					
CITY-ST-ZIP					6.4 CI	1Y-\$	r-ZIP					

14. I 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 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 of the receivor or trusted emporated to execute this coport as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or the exemption stated in Section 119.07(3)(i), 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 oath; that I am an officer or director of the corporation of the receiver or trusted emporated to execute this coport as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed on the corporation of the corporation