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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 05 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000072761 (8)

REMENA PROPERTIES, INC.

Principal Place of Business Mailing Address					
2531 4TH ST., NO. P SUITE B S		P. O. BOX 66411			
		ST. PETERSBURG FL 33736-6411			
ST. PETERSBURG FL 33704		US			
US				3. Date Incorporated or Qualified 10/20/1993	3a. Date of Last Report 05/24/1996
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3208440	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		o. Ochinedie of Olalos Besired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for i	
24	25 9. Name and Address of Curre	29	30		Yes No
050			81 Name	10. Name and Address of New Re	Jistered Agent
	PROBE L. HAYES III, SERVICES,	INC.	oi Name		
	1ST AVE. NORTH, SUITE 303		82 Street /	Address (P.O. Box Number is Not Acceptab	le)
81.1	PETERSBURG FL 33701				
			83		
			84 City		85 Zip Code
					FL I
11. Pursuant i	to the provisions of Sections 607.05 registered agent, or both, in the Stat	02 and 607.1508, Florida Statute	es, the above-named	corporation submits this statement for the poration's board of directors. I hereby accep	urpose of changing its registered
agent. I a	m familiar with, and accept the obli	gations of, Section 607.0505, Flo	rida Statutes.	polation's board of directors. Thereby accep	t the appointment as registered
SIGNATURE					
	Signature, lyped or printed name of registered a		Registered Agent signature		DATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	DPST DAUBED 14VE	L_ DELETE	1.1 THLE		Change Addition
NAME	DAUBER, JAYE	n	1.2 NAME		
STREET ADDRESS	2531 4TH ST NORTH, SUITE	В	1.3 STREET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG FL		1.4 CITY - ST - ZIP		
TITLE		L DELETE	2 1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY - ST - 7 iP		
TITLE		L DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. C(1Y - \$1 - Z(P		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADORESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 7HLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		j
CITY-ST-ZIP			5.4 CITY- ST-ZIP		ļ
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
14. I do herel	by certify that the information supplied	ed with this filing does not qualif	v for the exemption st	ated in Section 119.07(3)(i), Florida Statutes	. I further certify that the
inrormatio	n indicated on this abbual report or	Suppliemental annual report is to	ue and accurate and :	that my signature shall have the same legal	offeet as if made under eath, 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.					