

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # P94000067463 (7)

1. Corporation Name

JORGE ECHARTE, JR., INC.



Principal Place of Business

Mailing Address

5901 SUN BLVD.  
SUITE 100A  
ST. PETERSBURG FL 33715

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ST. PETERSBURG FL 33715

3. Date Incorporated or Qualified

09/09/1994

3a. Date of Last Report

05/01/1995

4. FEI Number

59-3271147

Applied For

No: 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

2. Principal Place of Business

2a. Mailing Address

21 6699 90<sup>th</sup> AVE N.  
Suite, Apt. #, etc

26 6699 90<sup>th</sup> AVE N.  
Suite, Apt. # etc

22 City & State

23 PINELLAS PARK, FL

27 City & State

28 PINELLAS PARK, FL

24 Zip 33782

25 Country

29 Zip 33782

30 Country

9. Name and Address of Current Registered Agent

CATALANO, RICHARD T  
18167 US 19 NORTH  
SUITE 560  
CLEARWATER FL 34624

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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.

SIGNATURE

Signature type: Corporate (for registered agent and chief executive officer)

(Initial: For New Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE P  
NAME ECHARTE, JORGE JR  
STREET ADDRESS 267 RAFAEL BLVD. N.E.  
CITY - ST - ZIP ST. PETERSBURG FL 33704

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE  
12 NAME  
13 STREET ADDRESS  
14 CITY - ST - ZIP

21 TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY - ST - ZIP

31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY - ST - ZIP

41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY - ST - ZIP

51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY - ST - ZIP

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 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 oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JORGE ECHARTE, JR.

7/24/96

813-541-1100

CR2E034 (3/96)