## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996

P95000086470 (8)

**DOCUMENT #** 

S. ROZA & COMPANY, INC.

rincipal Place of Business	Mailing Address	
P.O. BOX 310227 TAMPA FL 33680	P.O. BOX 310227 TAMPA FL 33680	



						3. Date Incorporated 11/06/1995	or Qualified	3a. Date	of Last	нероп
21	Tace of Business 28. Mailing Address 26			4. FEI Number 59-3342017					Applied For Not Applicable	
Suite, Apt.		Suite, Apt. #,	etc.			5. Certificate of Status	s Desired			5 Additional Required
City & State		City & State				6. Election Campaign Trust Fund Contrib				00 May Be ed to Fees
Zip <b>24</b>	Country	Zip	<del></del>	ountry		8. This corporation ha			x under :	s 199.032,
<b>24</b>	25 9. Name and Address of Curr	29 rent Registered Agent	30	7		Florida Statutes  10. Name and Addres	Yes		laant	
			-	81	Name	to. Name and Address	55 O. 110H P.	- Marenan	- sporit	
	S, JAMES P									
315 S	SOUTH HYDE PARK AVENUE			82	Street A	ddress (P.O. Box Number is N	lot Acceptabl	<b>e</b> )		
TAMP	'A FL 33606			В3						
<b>.</b>										
				84	City			FI	<b>8</b> 5 Z	ip Code
11. Pursuant t	to the provisions of Sections 607.05	02 and 607.1508, Florida	Statutes, the ab	ove r	named con	poration submits this statemen	nt for the purp	ose of cha	nging its	registered office
Or register	red agent, or both, in the State of Fig In, and accept the obligations of, So	unua. Such change was a	authonzed by the	corpo	oration's b	oard of directors. Thereby acc	cept the appo	intment as	registere	d agent. I am
SIGNATURE	, ,									
	Signature: typed or printed name of registered ag-		(NOTE: Registere	d Agen	l signature req	ukred when reinstating!		DATE		
12.	OFFICERS A	AND DIRECTORS	13.			ADDITIONS/CHANG	GES TO OFFI	CERS AND	DIRECT	ORS IN 12
TIFLE	ROZA, STEPHEN G	DELE	TE 1. 1 1	TITLE	Ī	Down Obserbers	<u>^</u>		] Change	■ Addition
RESIDE	noza, oternen a									
NAME			1.2 N	NAME	1	Roza, Stephen				
STREET ADDRESS	P.O. BOX 310227				ADDRESS	2801 E. Hills	borrough 7	venue		
			1.3 \$			2801 E. Hills		wenue		
STHEET ADDRESS	P.O. BOX 310227	☐ DELE	1.3 \$	STREET		2801 E. Hills	borrough 7		] Change	☐ Addition
STREET ADDRESS CITY: ST. ZIP	P.O. BOX 310227	☐ DELE	1.3 S 1.4 C TE 2 17	STREET CITY - S		2801 E. Hills	borrough 7		] Change	☐ Addition
STREET ADDRESS CITY - ST. ZIP TOLE	P.O. BOX 310227	☐ DELE	1.3 S 1.4 C TE 2 11 22 N	STREET CITY-S TITLE NAME		2801 E. Hills	borrough 7		] Change	Addition
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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 directly of the corporation or the receives or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 17 to the appears of an attachment you an address.

SIGNATURE:

Stephen G. Roza 1-33-96 (813) 231-2220