

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

**FILED**  
**Mar 19 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P96000051456 (7)**  
 1. Corporation Name  
**SEVENTH INNING STRETCH, INC.**



DO NOT WRITE IN THIS SPACE

Principal Place of Business <b>11 SECOND AVE NE</b> <b>510</b> <b>ST. PETERSBURG FL 33701</b> <b>US</b>	Mailing Address <b>111 SECOND AVENUE N.E.</b> <b>510</b> <b>ST. PETERSBURG FL 33701</b> <b>US</b>
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2. Principal Place of Business <b>21 1 Beach Drive SE</b> Suite, Apt. #, etc. <b>22 Suite 305</b> City & State <b>23 St. Petersburg, FL</b> Zip Country <b>24 33701-3953 25 US</b>	2a. Mailing Address <b>26 1 Beach Drive SE</b> Suite, Apt. #, etc. <b>27 Suite 305</b> City & State <b>28 St. Petersburg, FL</b> Zip Country <b>29 33701-3953 30 US</b>
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3. Date Incorporated or Qualified <b>06/17/1996</b>	Applied For Not Applicable
4. FEI Number <b>59-3384720</b>	
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent  
**STAVROS, GUS A.**  
**111 SECOND AVENUE NE**  
**SUITE 510**  
**ST. PETERSBURG FL 33701**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	<b>1 Beach Drive SE</b>
83	<b>Suite 305</b>
84 City	<b>St. Petersburg</b>
85 Zip Code	<b>FL 33701</b>

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>D</b> <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BOKOR, BRUCE H</b>	1.2 NAME	
STREET ADDRESS	<b>911 CHESTNUT STREET</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>CLEARWATER FL 34618</b>	1.4 CITY-ST-ZIP	
TITLE	<b>DP</b> <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>STAVROS, GUS A</b>	2.2 NAME	
STREET ADDRESS	<b>111 SECOND AVENUE NE., STE.510</b>	2.3 STREET ADDRESS	<b>1 Beach Drive SE, Suite 305</b>
CITY-ST-ZIP	<b>ST. PETERSBURG FL</b>	2.4 CITY-ST-ZIP	<b>St. Petersburg, FL 33701</b>
TITLE	<b>ST</b> <input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>STAVROS, PAUL B</b>	3.2 NAME	
STREET ADDRESS	<b>111 SECOND AVENUE NE, STE. 510</b>	3.3 STREET ADDRESS	<b>1 Beach Drive SE, Suite 305</b>
CITY-ST-ZIP	<b>ST. PETERSBURG FL</b>	3.4 CITY-ST-ZIP	<b>St. Petersburg, FL 33701</b>
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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 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.

SIGNATURE: *Gus A. Stavros* 3/12/98 813-822-4848

CR2E034 (10/97)