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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

1 Sandra B. Mortham-

Secretary & State
DIVISION OF CORPORATIONS

DOCUMENT # P96000102043 (2)

3/24

STEPHEN M. BARBAS, P.A.

BARBAS, WHEELEY, KOENIO

+ NUNEZ

Principal Place of Business

Mailing Address

FILED Jun 10 1997 8:00am Secretary of State

1802 WEST CLEVELAND STREET TAMPA FL 33806		1802 WEST CLEVELAND TAMPA FL 33606-1852	1802 West Cleveland Street Tampa FL 33606-1852				
					3. Date Incorporated or Qualified 12/18/1996	3a, Date of Last Report	
2. Principal Pl	2. Principal Place of Business 2s. Mailing Address			·	4. FEI Number	Applied For	
21		26	26		59-34/4702	Not Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			a Code on A Chaire Brained	\$8.75 Additional	
22		27	41,		Certificate of Status Desired	Fee Required	
City & State		Cily & State	<b>⊢</b> ′		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country				B. This corporation has liability for intangible tax under s. 199.032.		
24	25	29	30	•		Florida Statutes	
<del></del> 1	9. Name and Address of Curre			10. Name and Address of New Registered Agent			
BARE	BAS, STEPHEN M			81 Name			
1802 WEST CLEVELAND STREET			}	82 Street	Address (P.O. Box Number is Not Accepta	nio)	
	PA FL 33606		62 SIFER ACC		Action of the Box Hamber to Het Accopia	5107	
				83			
_			Ì	84 City		FL 85 Zip Code	
A Duraupat i	to the provining of Continue 607.06	00 and 607 1609 Florida Plat	utoo the ab	oue comod	accoration submits this statement for the		
office or re	egistered agent, or both, in the Sta	te of Florida, Such change was	authorized	ove-named by the corp	corporation submits this statement for the coration's board of directors. I hereby acce	pt the appointment as registered	
agent. I a	m familiar with, and accept the obli	igations of, Section 607,0505, I	Florida Stati	ites.			
SIGNATURE	Signature, typed or printed name of registered a	About and title it environtly (Ab	OII : Unniclosed	Anant riggal vo	required when re-ristating)	DATE	
12.		ND DIRECTORS	13.	Agent signature	ADDITIONS/CHANGES TO OFFI		
TITLE	<b>y</b>	DELETE	1,1 TH		VP	Change X Addition	
NAME	BARBAS, STEPHEN M	, <u>—</u>	1.2 NA		matthew B. Whee	Kel	
STREET ADDRESS	1802 WEST CLEVELAND STR	FET		RET ADDRESS	1802 10 (10,10/0	nh 53-	
CITY-ST-ZIP	TAMPA FL 33606			Y-ST-ZIP	1802 W. Clevela Tampa FL 336	06	
TITLE		DELETE	2 1 TiT		Shareholder	Change Addition	
NAME			2.2 NA	W.E	Develop = Winfalls	`	
STREET ADDRESS			2351	EE1 ADDRESS	1802 W. Clevela	nd St.	
CITY-ST-ZIP				Y - ST - ZIP	10-000 61 381	100	
TITLE		DELETE	3.1 1(1	·	shareholder	Change M Addition	
NAME			3.2 NA	ME	Kelly B. Nunez		
STREET ADDRESS			3 3 \$16	IEET ADDRESS	Kelly B. NUTIER 1802 W. Clevel	and St	
CITY-ST-ZIP			3.4. CI	Y - ST - ZIP	Tampa, EL 30	3606	
TITLE		☐ DELETE	4.1 TiT			Change Addition	
NAME	l		4. 2 NA	ME			
STREET ADDRESS			4.3 STF	EET ADDRESS		nc	
CITY-ST-ZIP			4.4 CIT	Y-\$T-ZIP		10	
TITLE		[] DELETE	5.1 TiT	£		☐ Change ☐ Addition .	
NAME			5.2 NA	ME		6.10	
STREET ADDRESS			5.3 \$18	ree1 address		V 1 -	
CITY-ST-ZIP			5.4 CIT	Y-\$T-7 P			
TITLE		☐ DELETE	61 TIT	LE		Change Addition	
NAME			6.2 NA	M€	60000221 -06/13/97010	1796	
STREET ADDRESS			6.3 \$10	REET ADDRESS		57028	
CHY-ST-ZIP			6.4 CIT	Y-S1-ZIP	***165.00		

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 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 3 if changed, or on an attackment with an address.

WATURE TONKING WILLIAM THE BEER

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