

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **S30741** (0)

1. Corporation Name:
ANTONY PALEY DANCE, INC.

Principal Place of Business:
**7311 PROCTOR ROAD
SARASOTA FL 34241**

Mailing Address:
**7311 PROCTOR ROAD
SARASOTA FL 34241**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Created: **02/11/1991** 3a. Date of Last Report: **07/20/1994**

4. FEI Number: **65-0247945** Approved For: Not Applicable

5. Certificate of Status Entered: **\$8.75 Additional Fee Required**

6. Director Campaign Contribution Trust Fund Established: **\$5.00 May Be Added to Fees**

8. This corporation has failed to file an annual report under S. 603.05, Florida Statute: Yes No

2. Principal Place of Business

2a. Mailing Address

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

22. City & State

27. City & State

24. City, State, & Zip

28. City, State, & Zip

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PALEY, ANTONY
7311 PROCTOR ROAD
SARASOTA FL 34241**

81. Name:
82. Street Address (if Not Applicable):
83.

84. City: **FL** 85. Zip Code:

11. Part of the purpose of this report is to determine if the corporation complies with the provisions of Chapter 603, Florida Statute, which require corporations to file an annual report. If the corporation fails to file an annual report, the Secretary of State may, at his or her discretion, suspend the corporation's right to do business in Florida.

12. OFFICERS AND DIRECTORS

13. ADDITIONAL OFFICERS AND DIRECTORS

NAME	V	OFFICE	<input type="checkbox"/> Chair <input type="checkbox"/> At-Large
PALEY, MARY JO			
7311 PROCTOR RD			
SARASOTA FL			
NAME	P	OFFICE	<input type="checkbox"/> Chair <input type="checkbox"/> At-Large
PALEY, ANTONY			
7311 PROCTOR RD			
SARASOTA FL			

NAME	OFFICE	<input type="checkbox"/> Chair <input type="checkbox"/> At-Large
NAME		
NAME		
NAME		
NAME		
NAME		
NAME		
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NAME		
NAME		

14. I certify that the information supplied on this report is true and correct, and I understand that I am personally liable for the accuracy of the information supplied. If I am not the sole officer or director, I am certifying that the information supplied is true and correct to the best of my knowledge and belief, and I am certifying that the information supplied is true and correct to the best of my knowledge and belief, and I am certifying that the information supplied is true and correct to the best of my knowledge and belief.

SIGNATURE: *Antony Paley*
SIGNATURE AND TYPE OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

5-11-95 (813) 723 7229

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APPROVED AND FILED
 MAY 15 1995
 TALLAHASSEE, FLORIDA

CORPORATION
 ANNUAL REPORT
 1995



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

DOCUMENT # S31250 (1)

1. Corporation Name
INNOVATIVE OUTDOOR PRODUCTS, INC.

Principal Place of Business: **7358 RIVERSIDE PL ORLANDO FL 32810**
 Mailing Address: **7358 RIVERSIDE PL ORLANDO FL 32810**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or qualified: **02/04/1991** 3a. Date of Last Report: **04/15/1994**
 4. FEI Number: **59-3052090** Applied For: Not 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 assets for intangible tax under § 199.032 Florida Statutes: Yes No

2. Foreign Office or Offices: 2a. Main Address:
 21. State: 26. State:
 22. City & State: 27. City & State:
 23. City & State: 28. City & State:
 24. City & State: 25. City & State: 29. City & State: 30. City & State:

9. Name and Address of Current Registered Agent
**MICKEY, SCOTT A.
 7358 RIVERSIDE PL
 ORLANDO FL 32810**

10. Name and Address of New Registered Agent
 81. Name: _____
 82. Street Address (P.O. Box Number is Not Acceptable): _____
 83. _____
 84. City: _____ 85. Zip Code: **FL**

11. This corporation certifies that the person or persons named in Article 9 of the Florida Statutes, the above named corporation submits the statement for the purpose of changing its registered office as indicated in part of this report. Under 2 Florida Statutes no change was authorized by the corporation's board of directors, thereby, an agent has appointment as registered agent. I am familiar with and accept the obligations of laws of the State of Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
NAME	P MICKEY, SCOTT A. 7358 RIVERSIDE PL ORLANDO FL	TYPE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ST TRAMER, KARL 7205 NORTHRIDGE BLVD. TAMPA FL	TYPE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		TYPE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		TYPE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		TYPE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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NAME		TYPE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		TYPE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I hereby certify that the information supplied with this filing is complete, truthful and accurate and that the corporation is in good standing and that the report is true and correct and that the report is filed for the purpose of changing its registered office as indicated in part of this report. I am familiar with and accept the obligations of laws of the State of Florida Statutes.

SIGNATURE: *Scott Mickey*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Scott Mickey

5/15/95 295-5741