FILE	NOW:	FILING	FEE	AFTER	MAY	1	IS	\$225.	.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

V55368

(7)

2826, INC.

Principal Place of Business Mailing Address									
2860 23RD AVE N 2860 23RD AVE ST PETERSBURG FL 33713 ST PETERSBURG			3713						
•						3. Date Incorporated or Qualified 08/05/1992	3a. Date 04	of Last Re 27/199	
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number			Applied For
21	100 or paginoss	26				59-3146135			Not Applicable
Suite, Ap:. #	t, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional Required
City & State 23		City & State	<u> </u>			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country	Zip	Cou	ntry		8. This corporation has liability for		x under s	199.032,
24	25	29	30	,			□No		
	9. Name and Address of Curr	ent Registered Agent		04		10. Name and Address of New I	registered A	Agent	
				81	Name				
	RUSSELL			82	Street Add	ress (P.O. Box Number is Not Accepta	ole)		
	rd ave., N. Ersburg fl 33713			В3					
				84	City		FL	85 Zi	p Code
				<u> </u>		oration submits this statement for the pu		noina its r	registered office
or register familiar wit	to the provisions of section 507.50 red agent, or both, in the State of Fith, and accept the obligations of, S			corp	oration's boa	and of directors. I hereby accept the app	oointment as	registered	d agent. I am
SIGNATURE: _	Signature, typed or printed name of registered a	gent and title if applicable. (No	OTE: Registered	1 Ago	nt signature requir	red when rainstating)	DATE	DIDECTO	200 111 40
12.		AND DIRECTORS	13.		 -	ADDITIONS/CHANGES TO OF		Change	Addition
TITLE	PST	☐ DELETE	1. 1 1				L		
NAME	MANTZ, RUSSELL		1.2 N						
STREET ADDRESS	2860 23RD AVE N				T ADDRESS				
CITY-ST-ZIP	ST PETERSBURG FL	T'] DELETE	2.1		ST-ZIP			Change	Addition
TITLE		вение	221						
NAME					T ADDRESS				
STREET ADDRESS					S1 - ZIP				
CITY-ST-ZIP TITLE		☐ DELETÉ		TITLE			[Change	Addition
NAME			321	IAME					
STREET ADDRESS			3.3.	STREE	ET ADDRESS				
CITY-ST-ZIP			340	CITY -	S1 - 21P				
TITLE		[] DELETE	4. 1	TITLE			ı	Change	☐ Addition
NAME			4.21	NAME					
STREET ADDRESS			43	STREE	T ADDRESS				
CITY-ST-ZIP					ST-ZIP			Change	Addition
THILE		☐ DELETE		TITLE	-		•	спанде	T VOULING
NAME				NAME	i i				
STREET ADORESS					T ADDRESS				
CITY - ST - ZIP					ST-ZIP			Change	Addition
TITLE		☐ DELETE		TITLE				onunge	
NAME				NAME					
STREET ADDRESS					ET ADDRESS				
CITY-ST-ZIP		ind with this filing is valuated to	64	CHTY-	ST-ZIP	y for the exemption stated in Section 11	9.07(3)(k), FI	orida Stati	utes. I further

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. Furner 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 frade under certify 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: President 3/22/96 813-323-3600

CR2E034 (12/95)