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Apr 11 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 151438 (9)

1. Corporation Name
YELLOW CAB COMPANY OF ST PETERSBURG INC.



Principal Place of Business

701 - 9TH STREET, SOUTH
P.O. BOX 12675
ST. PETERSBURG FL 33733-2675

Mailing Address

701 - 9TH STREET, SOUTH
P.O. BOX 12675
ST. PETERSBURG FL 33733-2675

3. Date Incorporated or Qualified
06/23/1947

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

4. FEI Number

59-0573493

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 liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

PLECAS, JOHN R.
701 9TH STREET SOUTH
ST PETERSBURG FL 33705

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME BOND, MARY ANNE
STREET ADDRESS 701 9TH ST S
CITY-ST-ZIP ST PETERSBURG FL

TITLE C
NAME SHOUPPE, BYRON C JR
STREET ADDRESS 701 9TH ST S
CITY-ST-ZIP ST PETERSBURG FL

TITLE ST
NAME MCLEAN, BRENT S.
STREET ADDRESS 701 9TH ST S
CITY-ST-ZIP ST PETERSBURG FL

TITLE D
NAME SHOUPPE, GARY
STREET ADDRESS 701 9TH ST S
CITY-ST-ZIP ST PETERSBURG FL

TITLE D
NAME MCLEAN, SUSAN
STREET ADDRESS 701 9TH ST. S.
CITY-ST-ZIP ST PETERSBURG FL

TITLE P
NAME PLECAS, JOHN, R
STREET ADDRESS 701 9TH ST., S
CITY-ST-ZIP ST PETERSBURG FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 13 or changed or on an attachment with an address.

SIGNATURE: *John R. Plecas* JOHN R. PLECAS 4/8/97 (813) 822-8780
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)