COF ANN	E NOW: FILING FEE PROFIT PORATION JAL REPORT 1996 MENT # 23227	FLORIDA DEP Sandra Secre DIVISION OF	ARTMENT OF STATE B Mortham lary of State CORPORATIONS		
1. Corporatio AND	n Name ERSON ENTERPRISES INC	OF TAMPA Mailing Address			
5701 W MARINER Tampa Fl 33609		5701 W MARINER Tampa Fl. 33609		3. Date lugge perture or Qualified 3a. Date of Jast Benor 01/18/1961	
Principal Planting	lace of Business	A Mallace Addeses			1
2. Principal Pi 21	ace of Business	2a. Mailing Address 26		4. FET 59-0912825	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #. etc.		5. Certificate of Status Desired	<b>\$8.75</b> Additional     Fee Required
City & Stati	e	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Ζιρ 29	Country 30	8. This corporation has liability for in Florida Statutes I Yes	nlangible tax under s. 199.032,
	9. Name and Address of Curren	t Registered Agent	81] Name	10. Name and Address of New R	egistered Agent
ANDERSON, T. EMMET, JR. 5701 W. MARINER, APT. #404 TAMPA FL 33609				ess (P.O. Box Number is Not Acceptabl	e) 
or register familiar wi SIGNATURE	to the provisions of Sections 607.0502 red agent, or both, in the State of Florid in, and accept the obligations of, Sections Sectored agent for prived rame of regreend agent OFFICE RS AND	da, Such chango was authoriz ion 607.0505, Florida Statutos and the namber of 177	ed by the corporation's boar It's Reader Agent spectre is given		intment as registered agent. I am
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	ANDERSON, EMMETT T., JI 5701 W MARINER TAMPA FL		13. 1 3 THLF 12 NAME 13 STHEET AUDRESS 14 CHY - SU-ZP	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12 CERS AND DIRECTORS IN 12 Change Addition Change Addition
TITLE NAME STREET ACORESS CITY - ST - ZIP	PS ANDERSON, JAMIE S. 5701 W MARINER TAMPA FL	[] OELETE	2 1 TILLE 2 2 NAME 2 3 STREET ADDRESS 2 4 CITY - ST- 7(P		Change Addition
T-TEF NAME STREET ADDRESS C-TY - ST - ZIP		[] DELETE	9 1 THLE 3 2 NAM: 3 3 STREET ADORESS 3 4 CHY - S1 - ZH		Chang? ☐ Addition
T TEF NAME STREET ADDRESS CITY - ST- ZIP		D\$1FTE	4 1 THU? 4 2 NAME 4.3 STREET ADDRESS 4.4 OUTY - ST-ZIE		Change Addition
TOTLE NAME STREET ADDRESS CITY - ST - ZIP		ם מינטיג	5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CITY - ST - 202		Change Addition
THLF NAME STREET ADDRESS CITY - ST - ZIP		C) DELETE	6 1 TILE 6 2 NAME 6 3 STREET ACORESS 6 4 CITY ST ZIP		[] Change [] Addition
<ol> <li>I do hereb certify that oath; that appears in</li> </ol>	t the information indicated on this annu	al report or supplemental ann ration or the receiver or truste m an attachment with an addr Im Linston W	ished and does not out ly to ua report is true and accurate empowered to execute the ess.	or the exemption stated in Section 119.0 te and that my signature shall have the s s report as resurred by Chapter 607. Flo $\mathcal{T}$ Auderson 4/1	same legal effect as if made under rida Statutes; and that my name