ANNUAL REFORM Executery of State 1997 DURGEN OF CORPORATIONS OCUMEENT # 249101 (7) ARNEERS SHACE STORE, INC. Image: Corporation of Corporation of State Decomposition of Corporation of Corp	FILE NOW: FILING F	FILED					
OCUMENT # 249101 (7) ARNERS SHOE STORE, INC. Open Product In Buncas Specific Residue Specif Residue Specific Re	CORPORATION ANNUAL REPORT	Sandra B. Secretary	Sandra B. Mortham Secretary of State		Jan 14 1997 8:00am		
Court Press of Reserverse Court Reserverse Co	CUMENT # 24910		ORPORATIONS	_ Secreta	ry of St	ate	
A. F. 1986 TAMPA F. 19858-9817 A. F. 1986 B. Marting Actiness A. F. 1986 B. Marting Actiness A. F. F. Harmon Developmental or Qualified Series Act. P. C. Series Act. P. C. Series Act. P. Series Act. P. C. Series Act. P. C. Series Act. P. Ser		U					
Procesor Place of Booleross Ia. Mailing Activities FEI Number Applied For Salet, Apt #, ittl: 21 Salet, Apt #, ittl: 22 Salet, Apt #, ittl:						port	
Sale: Apt #, etc Sale: Apt #, etc <td< th=""><th>ncipal Place of Business</th><th>28. Mailing Address</th><th></th><th>4. FEI Number</th><th></th><th>blied For</th></td<>	ncipal Place of Business	28. Mailing Address		4. FEI Number		blied For	
27 P. Controlled of State Fee Required Fee Required City & State E. Excellen Campaign Financing \$5.00 May be 7 74 Country 8. The corporation machability for interrighted as whole is Nov 2000. 9. Name and Address of Current Registered Agent 10. Name and Address of Lurent Registered Agent 10. Name and Address of New Registered Agent 1918 SO DALE MABRY TMIPA, FL 10. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 1918 SO DALE MABRY TMIPA, FL 10. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 1918 SO DALE MABRY TMIPA, FL 10. Name and Address of Current Registered Agent 10. Name and Address (PO. Box Number is Not Acceptable) 1918 SO DALE MABRY TMIPA, FL 10. State Corporation submits the state meet to the purpose of charging its registered agent 1 and make with and caupt the object corporation submits the state meet to the purpose of charging its registered agent 1 and make with and caupt the object corporation submits the state meet by accept the appointment is registered agent 1 and make with and caupt the object corporation submits the state meet by accept the appointment is registered agent 1 and the date with and caupt the object corporation submits the state meet by accept the appointment is registered agent 1 and the date meet address are address to other corporation submits the state meet by accept the appointment is registered agent 1 and the date with a date of the corporation submits the state meet by accept the appointment is registered agent 1 and the date date meet by accept the appointment is	lite. Apt. #. etc				CO 75 .		
Zp Trust Fund Centribution Added to Press Zp Zp Country 8. This corporation has lability for itangable fax under a 198.022. 3. Name and Address of Current Registered Agent 50. Name and Address of New Registered Agent 50. Name and Address of New Registered Agent EDELSTEIN, RESSE B 191 B SO DALE MARRY 51 Name 62 Street Address (P O Box Number is Net Acceptable) 40 City FL 63 51 City 63 41 City FL 63 20 Country 63 42 City FL 63 20 Country 64 43 City FL 63 20 20 Country 44 City FL 63 20 20 Country 45 City FL 63 20 20 20 46 City FL 63 20 20 20 47 City FL 63 20 20 20 48 City FL 64 20 20 20 49 City FL 64 20 20 20 40 City FL 64 20 20 <td></td> <td>27</td> <td></td> <td></td> <td>L.J Fee Rec</td> <td>beriup</td>		27			L.J Fee Rec	beriup	
Image: solution is and Address of Current Registered Agent Princip Stands Vest No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent EDELSTEIN, EESSIE B 1918 SO DALE MABRY 10. Name and Address (P.O. Box Number is Not Acceptable) 33820 41 City FL 62 Presunt to the providence of Sections (D/ Cr02 and D07 1506 Florids Statutes he adverted to the expression of the application of the providence of designed to the Section of CO2 CO2, Hor de statutes. 63 MUHB Expression of the adverted accept the defigitions of Section (Cr02 CO2, Hor de statutes. 64 City FL 65 Zp Code Optimizer Agent of the adverted accept the defigitions of Section (Cr02 CO2, Hor de statutes. 10. Name and Address of Corporation submits the statutes. More applications to adverted accept the defigitions of Section (Cr02 CO2, Hor de statutes. NATURE Expression of the adverted accept the defigitions of Section (Cr02 CO2, Hor de statutes. 10. Adverted accept the adverted	iy & State	here a la f		,			
S. Name and Address of Current Registered Agent DELSTEIN, BESSIE B Signame		h				199.032,	
33829	1918 SO DALE MABRY		82 Street Add	ress (P.O. Box Number is Not Acceptab	le)		
Presume to the provisions of Sections 607 0507 and 607 1506. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent and floride with, and accept the obligations of Section 67000, Florida Statutes. NATUHE Section Section 1 and accept the obligations of Section 67000, Florida Statutes. NATUHE OF INCERS AND DHIL COORS OF INCERS OF IN	•		83		********		
Processor of Sections and Sections and Sections and Phanging Its registered agency in the intervent of the processor of agency intervent as registered agency intervent agency			84 City		85 Zip C	ode	
e EDeLSTEIN, BESSIE B 12 MAR E1 HADRESS 13 SIMET ADDRESS SIT //P TAMPA, FLORIDA 33609 e V e V e Consigner e V e Consigner e V e Consigner e Structure e Structure e Structure e Structure e DELETE structure Cha	Pursuant to the provisions of Sections 60 office or registered agent, or both, in the	07.0502 and 607.1508, Florida Statute State of Florida Such change was a		poration submits this statement for the p ation's board of directors. I hereby accep		ragistarad	
B1 ADDERSS 1918 SO DALE MABRY 13 STMET ADDRESS -ST. ZP TAMPA, FLORIDA 33609 14 CIV-ST-ZP E V DELETE E EDELSTEIN, MICHAEL 21 Tritr E EDELSTEIN, MICHAEL 21 Tritr 1918 SO DALE MABRY 23 SIRET ADDRESS 157. ZP TAMPA, FLORIDA 33609 24 CIV-ST-ZP F ST DELETE F BASS, FRANK 31 SIRET ADDRESS 157. ZP TAMPA, FLORIDA 33609 24 CIV-ST-ZP F BASS, FRANK 31 SIRET ADDRESS 157. ZP TAMPA, FLORIDA 33609 24 CIV-ST-ZP F BASS, FRANK 33 SIRET ADDRESS 157. ZP TAMPA, FLORIDA 33609 34 CIV-ST-ZP E Change Addition F BASS, FRANK 33 SIRET ADDRESS 157. ZP TAMPA, FLORIDA 33609 34 CIV-ST-ZP E DELETE 41 TITLE Change F BASS 57 ZP Change Addition F DELETE 51 TITLE Change Addition F DELETE <th>office or registered agent, or both, in the agent 1 am familiar with, and accept the IATURE Sector Pasarray of teaching and reserves of teaching agents.</th> <th>e State of Florida, Such change was a obligations of Section 607.0505, Flo reelagementate Lagonate (401</th> <th>es, the above-named cor iulthorized by the corpora rida Statutes.</th> <th>ition's board of directors. I hereby accep</th> <th>urpose of changing its of the appointment as r DATE</th> <th>registered egistered</th>	office or registered agent, or both, in the agent 1 am familiar with, and accept the IATURE Sector Pasarray of teaching and reserves of teaching agents.	e State of Florida, Such change was a obligations of Section 607.0505, Flo reelagementate Lagonate (401	es, the above-named cor iulthorized by the corpora rida Statutes.	ition's board of directors. I hereby accep	urpose of changing its of the appointment as r DATE	registered egistered	
V DELETF 21 THLF Change Addition E EDELSTEIN, MICHAEL 22 MAKE 23 SIREELADRESS	office or registered agent, or both, in the agent 1 am familiar with, and accept the IATURE Example reduced to the OFFICE F	e State of Florida, Such change was a obligations of Section 607.0505, Flo reelagemantule taggeable (401 RS AND DIRECTORS	es, the above-named con uthorized by the corpora rida Statutes. Bigistered Agent signature requ 13. 11 TITLE	ition's board of directors. I hereby accep	DATE DATE DATE DATE	registered egistered	
EDELSTEIN, MICHAEL EDELSTEIN, MICHAEL EXAMPL EXAMPLE EXAMPLE ST 2P TAMPA, FLORIDA 338009 2 4 GIY-ST-ZIP ST TAMPA, FLORIDA 338009 2 4 GIY-ST-ZIP ST TAMPA, FLORIDA 338009 2 4 GIY-ST-ZIP ST TAMPA, FLORIDA 338009 2 4 GIY-ST-ZIP C ST	IADDRESS P1818 SO DALE MABRY	e State of Florida, Such change was a obligations of Section 607.0505, Flo reelagemantule taggeable (401 RS AND DIRECTORS	es, the above-named con luthorized by the corpora rida Statutes. Biglistered Agent signature requ 13. 11 TITLE 12 NAME	ition's board of directors. I hereby accep	DATE DATE DATE DATE	s registered egistered S IN 12	
St. ZP TAMPA, FLORIDA 33609 2 4 CITY-ST-ZP ST DELETE 3 TITLE BASS, FRANK 32 NAME 17 ADRESS 1918 SO DALE MABRY ST-ZP TAMPA, FLORIDA 33609 34 CITY-ST-ZP TAMPA DELETE 41 TITLE Change Addition 42 STREET ADDRESS ST-ZP DELETE 41 CITY-ST-ZP Change Addition 42 STREET ADDRESS ST-ZP DELETE DELETE 51 TITLE Change Addition ST ZP DELETE DELETE 51 TITLE ST ZP ST STREET ADDRESS ST ZP STREET ADDRESS STREET ADD	Interest of the second agent, or both, in the agent I am familiar with, and accept the second second thread of the second second threads of the second secon	e State of Florida, Such change was a publigations of, Section 607.0505, Flo reentagen and the tagencable (901) RS AND DIRECTORS	es, the above-named con ruthorized by the corpora rida Statutes. Biglistered Agent signature requinant 13. 11 TITLE 12 NAME 13 STHEET ADD4ESS 14 CITY-ST-ZIP	ition's board of directors. I hereby accep	DATE Change CATE Change CATE Change	s registered egistered S IN 12	
BASS, FRANK 1918 SO DALE MABRY SI-2P 32 NAME TAMPA, FLORIDA 33609 34 CITY-ST-2P TAMPA, FLORIDA 33609 0 DELETE 1 DELETE 4.1 TITLE 4 2 NAME 4 3 STREET ADDRESS ST-2P Change Addition 4 2 NAME 4 3 STREET ADDRESS ST-2P Change DELETE 4 4 CITY-ST-7P Change DELETE 53 STREET ADDRESS ST-2P DELETE 54 CITY-ST-7P Change Addition 53 STREET ADDRESS ST-2P DELETE S1 ADRESS S1 - 2P DELETE S3 STREET ADDRESS S1 - 2P DELETE S4 CITY-ST-7P S4 CITY-ST-7P Change Addition 6 2 NAME S3 STREET ADDRESS S1 - 2P Change Change Addition 6 3 STREET ADDRESS<	IATURE AUGMENT Contraction of the second sec	e State of Florida, Such change was a publigations of, Section 607.0505, Flo reentagen and the tagencable (901) RS AND DIRECTORS	es, the above-named con ruthorized by the corpora rida Statutes. Bigistered Agent signature requ 13. 11 TITLE 12 NAME 13 STREET ADD4ESS 14 CITY-ST-ZIP 21 TITLE 22 NAME	ition's board of directors. I hereby accep	DATE Change CATE Change CATE Change	s registered egistered S IN 12	
SI-2P TAMPA, FLORIDA 33609 34 CITY-SI-2IP DELETE 41 TITLE Change Addition 4 2 NAME 43 STREET ADDRESS 43 STREET ADDRESS SI-2P DELETE 51 TITLE Change Addition 1 ADDRESS 33 STREET ADDRESS 44 CITY-SI-7IP Change Addition 1 ADDRESS 51 TITLE Change Addition 1 ADDRESS 53 STREET ADDRESS 53 STREET ADDRESS Addition 51 ZIP DELETE 51 TITLE Change Addition 1 ADDRESS 53 STREET ADDRESS 54 CITY-SI-7IP Change Addition 1 ADDRESS 53 STREET ADDRESS 54 CITY-SI-7IP Change Addition 1 ADDRESS 53 STREET ADDRESS 53 STREET ADDRESS Addition 62 NAME Change Addition 1 ADDRESS 64 CITY-SI-7IP Change Addition 64 CITY-SI-7IP Change Addition 1 ADDRESS 64 CITY-SI-7IP Change Change Addition 62 NAME Change Addition 1 ADDRESS 64 CITY-SI-7IP Change Change Addition	International Content of the second agent of t	e State of Florida, Such change was a obligations of, Section 607.0505, Flo reelaged and the Tagonate (401 RS AND DIRECTORS	es, the above-named con uthiorized by the corpora rida Statutes. Bigistered Agent signature requinant 13. 11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS	ition's board of directors. I hereby accep	DATE Change Change	S IN 12	
ET ADDRESS 4 2 NAME ET ADDRESS 43 STRET ADDRESS ST ZP 44 CIPY-ST-ZIP DELETE 5.1 TITLE DELETE 5.2 NAME S2 NAME 5.3 STRET ADDRESS S1 ZIP 54 CITY-ST-ZIP DELETE 6.1 TITLE DELETE 5.3 STRET ADDRESS S1 ZIP 54 CITY-ST-ZIP DELETE 6.1 TITLE Change Addition 6.2 NAME 5.3 STRET ADDRESS S1-ZIP 6.3 STRET ADDRESS 6.3 STRET ADDRESS 6.3 STRET ADDRESS (S1-ZIP) 6.4 CITY-ST-ZIP I do hereby cert-ly 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that that my name	office or registered agent, or both, in the agent I am familiar with, and accept the DATURE Source Parameter of Second Paramet	e State of Florida, Such change was a obligations of, Section 607.0505, Flo reelaged and the Tagonate (401 RS AND DIRECTORS	as, the above-named con ultivorized by the corpora rida Statutes. Bigistered Agent signature requi- 13. 11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 31 TITLE 3.2 NAME	ition's board of directors. I hereby accep	DATE Change Change	s in 12	
ST ZIP 44 CPY-SE-ZIP DELETE 5.1 ITLE DELETE 5.1 ITLE ST ZIP 5.2 NAME ST ZIP 5.3 STREET ADDRESS ST ZIP 5.4 CITY-ST-ZIP DELETE 6.1 TITLE DELETE 6.1 TITLE ODLETE 6.1 TITLE Change Addition ST-ZIP 6.1 TITLE DELETE 6.1 TITLE ST-ZIP 6.3 STREET ADDRESS S1-ZIP 6.3 STREET ADDRESS S1-ZIP 6.4 CITY-ST-ZIP I do hereby certily 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 information indicated on this annual report or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name	ADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TAMPA, FLORIDA 33609 V EDELSTEIN, MICHAEL 1918 SO DALE MABRY TAMPA, FLORIDA 33609 ST BASS, FRANK 1918 SO DALE MABRY	e State of Florida, Such change was a publigations of, Section 607.0505, Flo RS AND DIRE CTORS	as, the above-named con- ultivorized by the corpora- rida Statutes. Begistered Agent signature requination in the second seco	ition's board of directors. I hereby accep	DATE DATE Change	S IN 12 Addition	
DELETE Change Addition detemption detempti detempti detempti detemption detemption	ADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TAMPA, FLORIDA 33609 V EDELSTEIN, MICHAEL 1918 SO DALE MABRY TAMPA, FLORIDA 33609 ST BASS, FRANK 1918 SO DALE MABRY	e State of Florida, Such change was a publigations of, Section 607.0505, Flo RS AND DIRE CTORS	es, the above-named con ruthorized by the corpora rida Statutes. Bigistered Agent signature requinance 13. 11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 2 4 CITY-ST-ZIP 31 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE	ition's board of directors. I hereby accep	DATE DATE Change	S IN 12	
I ADDRESS 5.3 STREET ADDRESS S1-7/P 54 CITY-S1-7/P I ADDRESS 5.4 CITY-S1-7/P I ADDRESS 6.1 TITLE I ADDRESS 6.1 TITLE I ADDRESS 6.3 STREET ADDRESS S1-7/P 6.3 STREET ADDRESS S1-7/P 6.3 STREET ADDRESS S1-7/P 6.3 STREET ADDRESS S1-7/P 6.4 CITY-S1-7/P I do hereby cert-ly 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 as true and accurate and that my signature shall have the same legal effect as if made under oath, that an 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	ADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TAMPA, FLORIDA 33609 ST BASS, FRANK 1918 SO DALE MABRY TAMPA, FLORIDA 33609 ST BASS, FRANK 1918 SO DALE MABRY TAMPA, FLORIDA 33609	e State of Florida, Such change was a publigations of, Section 607.0505, Flo RS AND DIRE CTORS	es, the above-named con ruthorized by the corpora- rida Statutes. Bigistered Agent signature requ- 13. 11 TITLE 12 NAME 13 STREET ADD4ESS 14 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 31 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	ition's board of directors. I hereby accep	DATE DATE Change	S IN 12 Addition	
S1-ZIP 54 CITY - S1-ZIP DELETE 5.1 TITLE DELETE 6.1 TITLE 6.1 TITLE Change Addition 6.2 NAME 6.3 STREET ADDRESS (S1-ZIP) 6.4 CITY - S1-ZIP 1 do hereby cert-ly 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 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	ATURE Agent Lam familiar with, and accept the agent Lam familiar with, and accept the DATURE EXactor factor for other choose controls of FICE F EDELSTEIN, BESSIE B 1918 SO DALE MABRY TAMPA, FLORIDA 33609 V EDELSTEIN, MICHAEL 1918 SO DALE MABRY TAMPA, FLORIDA 33609 ST BASS, FRANK 1918 SO DALE MABRY TAMPA, FLORIDA 33609 LADORESS LADORESS LADORESS LADORESS	E State of Florida, Such change was a publigations of, Section 607.0505, Flo revelages and the Lagracable (401 RS AND DIRE CTORS	es, the above-named con ruthorized by the corpora- rida Statutes. Bigistered Agent signature requ- 13. 11 TITLE 12 NAME 13 STREET ADD4ESS 14 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	ition's board of directors. I hereby accep	DATE DATE Change of change	S IN 12 S IN 12 Addition Addition Addition	
ET ADDRESS	ATURE Agent Lam familiar with, and accept the agent Lam familiar with, and accept the DATURE EXactor factor for other choose controls of FICE F EDELSTEIN, BESSIE B 1918 SO DALE MABRY TAMPA, FLORIDA 33609 V EDELSTEIN, MICHAEL 1918 SO DALE MABRY TAMPA, FLORIDA 33609 ST BASS, FRANK 1918 SO DALE MABRY TAMPA, FLORIDA 33609 LADORESS LADORESS LADORESS LADORESS	E State of Florida, Such change was a publigations of, Section 607.0505, Flo revelages and the Lagracable (401 RS AND DIRE CTORS	es, the above-named con uthiorized by the corpora- rida Statutes. Bigistered Agent signature requ- 13. 11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 44 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	ition's board of directors. I hereby accep	DATE DATE Change of change	S IN 12 S IN 12 Addition Addition Addition	
ET ADDRESS 6.3 STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP 6.4 CITY - ST - ZIP 6.4 CITY - ST - ZIP 7.4 CITY - ST - Z	ATURE Agent Lam familiar with, and accept the ATURE Exactor Parameter of Section (Constitution) P EDELSTEIN, BESSIE B 1918 SO DALE MABRY TAMPA, FLORIDA 33609 V EDELSTEIN, MICHAEL 1918 SO DALE MABRY TAMPA, FLORIDA 33609 ST BASS, FRANK 1918 SO DALE MABRY TAMPA, FLORIDA 33609 ST TAMPA, FLORIDA 33609	E State of Florida, Such change was a publigations of, Section 607.0505, Flo revelages and the Lagracable (401 RS AND DIRE CTORS	es, the above-named con uthiorized by the corpora Final Statutes. Final	ition's board of directors. I hereby accep	DATE DATE Change of change	S IN 12 S IN 12 Addition Addition Addition	
-S1-ZIP I do hereby cert-ly 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	ATURE Agent Lam familiar with, and accept the ATURE Exactor Parameter of Section (Constitution) P EDELSTEIN, BESSIE B 1918 SO DALE MABRY TAMPA, FLORIDA 33609 V EDELSTEIN, MICHAEL 1918 SO DALE MABRY TAMPA, FLORIDA 33609 ST BASS, FRANK 1918 SO DALE MABRY TAMPA, FLORIDA 33609 ST TAMPA, FLORIDA 33609	E State of Florida, Such change was a publigations of, Section 607.0505, Flo revelager and the Tagerable (ROI RS AND DIRE CTORS	es, the above-named con uthiorized by the corpora rida Statutes. Hogistered Agent signature requining 13. 11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY - ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY - ST-ZIP 31 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	ition's board of directors. I hereby accep	DATE DATE DATE DATE DATE DATE DATE DECTORS AND DIRECTORS Change Change Change	S IN 12 Addition Addition Addition	
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 it 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	ATURE Agent Lam familiar with, and accept the ATURE Exactor Parameter of second second regar OFFICE F EDELSTEIN, BESSIE B 1918 SO DALE MABRY TAMPA, FLORIDA 33609 V EDELSTEIN, MICHAEL 1918 SO DALE MABRY TAMPA, FLORIDA 33609 ST BASS, FRANK 1918 SO DALE MABRY TAMPA, FLORIDA 33609 ST BASS, FRANK 1918 SO DALE MABRY TAMPA, FLORIDA 33609 ST BASS, FRANK 1918 SO DALE MABRY TAMPA, FLORIDA 33609 ST TAMPA, FLORIDA 33609 ST TAMPA, FLORIDA 33609 ST TAMPA, FLORIDA 33609	E State of Florida, Such change was a publigations of, Section 607.0505, Flo revelager and the Tagerable (ROI RS AND DIRE CTORS	as, the above-named con- ulti-orized by the corpora- rida Statutes. Bogistered Agent signature requ- 13. 11 TITLE 12 NAME 13 STHEET ADDRESS 14 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 31 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	ition's board of directors. I hereby accep	DATE DATE DATE DATE DATE DATE DATE DECTORS AND DIRECTORS Change Change Change	S IN 12 Addition Addition	
	ATURE P IATURE Source Parameter of benefities with, and accept the officer office	e State of Florida. Such change was a o obligations of, Section 607.0505, Flo revelager and the Tagerate (ROI RS AND DIRE CTORS DELETE DELETE DELETE DELETE DELETE DELETE	es, the above-named con uthiorized by the corpora rida Statutes. Highstend Agent signature requins 13. 11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 31 TITLE 4.2 NAME 4.3 STREET ADDRESS 34 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 5.4 CITY-ST-ZIP 6.1 TITLE 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP	ation's board of directors. Thereby acception and the state of the sta	DATE :: DATE :: ERS AND DIRECTORS Change Change Change Change	s registered egistered S IN 12 Addition Addition Addition Addition	
	office or registered agent, or both, in the agent Lam familiar with, and accept the DATURE IATURE Exactor factor contraction thread of the DELSTEIN, BESSIE B 14D0RESS St. ZIP V EDELSTEIN, BESSIE B 1918 SO DALE MABRY TAMPA, FLORIDA 33609 V EDELSTEIN, MICHAEL 1918 SO DALE MABRY TAMPA, FLORIDA 33609 V EDELSTEIN, MICHAEL 1918 SO DALE MABRY TAMPA, FLORIDA 33609 ST BASS, FRANK 1918 SO DALE MABRY TAMPA, FLORIDA 33609 ST BASS, FRANK 1918 SO DALE MABRY TAMPA, FLORIDA 33609 ST BASS, FRANK 1918 SO DALE MABRY TAMPA, FLORIDA 33609 ST ZIP TADORESS S	State of Florida. Such change was a obligations of, Section 607.0505, Flo Centager and the Lagrander (ROI RS AND DIRE CTORS DELETE DELETE DELETE DELETE DELETE Supplied with this filing does not quali- supplied with this filing does not qual- point or supplicit ental annual report is the supplication of the supplication.	as, the above-named con uthiorized by the corpora rida Statutes. Bigistered Agent signature req 13. 11 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 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 5.4 CITY-ST-ZIP 1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 1 TITLE 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 1 TITLE 6.1 TITLE 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 1 Y for the exemption state 1 Y for the exemption state 1 ADDRESS 1 ADDRESS	ation's board of directors. Thereby accept and when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE DATE DATE DATE DATE DATE DATE DATE	S IN 12 Addition Addition Addition Addition Addition Addition	

•