## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 365064

(5)

AMERICAN CANVAS PRODUCTS CORP.

FILED Feb 28 1997 8:00am Secretary of State

FOR   FO	ESILE CIUL DI		

Principal Place of	f Bosiness	Mailing Address				I KORIKE IIIU BIIDI EKKA OKIR EKAL QUDI OKOTI DIKI DIDI EKAL DIDI OTOK EK				
3901 NEBRASKA		Ü	3901 NEBRASKA AVENUE							
TAMPA FL 33603	VICHOE	TAMPA FL 33603-5017								
			3.	3. Date Incorporated or Qualified 3a. Date of Last Repo 06/03/1970 04/19/1996			Report			
2. Principal Place	e of Business	2a. Mailing Address			4.	FEI Number	1 011	<del></del>	polied For	
21		26	Suite, Apt. #, etc.		59-1295288			N	ot Applicable	
Suite. Apt. # ic 22	oto	27			5.	Certificate of Status Desired			Additional equired	
City & State 23		City & State 28			6.	Election Campaign Financing Trust Fund Contribution			May Be to Fees	
<b>Ζ</b> φ	Country	Zip	Country	/	8.	This corporation has liability for i		-	. 199.032,	
24	25		30					.) No		
	9. Name and Address of Curren	it Registerea Agent	81	Name o		Name and Address of New Re	jistered A	gent		
	JR, JAY			S		k, Jay Scott III				
	N EDISON AVE		82	Street Add	On A	O. Box Number is Not Acceptable W. Meadowbrook Av	le)			
TAMPA 33613	l, FL		83		700	WE MODIOUS AV	erre	<del></del>		
33013										
			84	City Tr	ampa	•	FL		Code 612	
11. Pursuant to ti	he provisions of Sections 607.050	2 and 607.1508, Florida Statute	s, the abov							
office or regi agent if am t	he provisions of Sections 607,050 (tered agent, or both, in the State (miliar with Lind accept the oblig	of Florida. Such change was au ations of, Section 607,0505, Flor	uthorized b rida Statute	y the corpora s.	ition's k	board of directors. I hereby accept	t the appo	pintment as	registered	
SIGNATURE	17/									
Sign	mire type d'or printed name of registered age		Registered Ap	Scott S ent signature requi				.4		
12.	OFFICERS AN		13.			ADDITIONS/CHANGES TO OFFIC		<u> </u>		
f 1/2	OCO	XX DELETE	1.1 TITLE		CD	7 7414 CICOMM WWW	1	Change	Addition	
	STARK, JAY JR. 13810 N. EDISON AVE.		1.2 NAME			K, JAY SCOTT III				
	IAMPA FL			ADDRESS 1	XMP/	AW. Meadowbrook Av FLORIDA 33612	enue			
	SD	ZZ DELETE	1.4 CITY - S 2.1 TITLE			. MORIDA 33015		Change	Addition	
	STARK, PATRICIA C.		2.2 NAME		SD	r warmoro e		E=F Orkingt	Addition	
	13810 N. EDISON AVE.			ADDRESS 1	OVS TWY	K, VALERIE J. W. Meadowbrook AV	יאדדדעי			
	AMPA FL		2. 4 CITY -			L. FLORIDA 33612	EAT U.E.			
TITLE V		see change	3.1 TITLE		WAY.	Y PHOTEN		Change	Addition	
NAME S	STARK, JAY SCOTT III	see cuange	3.2 NAME	-						
	1908 W. MEADOWBROOK		3.3 STREE	ADDRESS						
CITY-ST ZIP	IAMPA FL		3.4. CITY -	ST-ZIP						
TITLE		DELETE	4.1 TITLE					Change	Addition	
NAME			4. 2 NAME							
STREET ADDRESS			4.3 STREET	ADDRESS						
CITY - ST - 7IP			4.4 CITY-5	ST-ZIP	•••••			r		
TITLE		☐ DELETE	5.1 TITLE					Change	Addition	
NAME			5.2 NAME							
STREET ADORESS				ADDRESS						
City St. ZiP		T Deserte	5.4 CITY - 3	ST-ZIP				T 20	1	
TITLE		☐ DELETE	6.1 TITLE					Change	Addition	
NAME			6.2 NAME							
STREET ADDRESS				ADDRESS						
City - St - ZiP			6.4 CITY - 3	SI-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 ¶ ock 13 if changed, or on an attachingut with an address.

SIGNATURE:

DATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jay Scott Stark III 2-25-97 (813)247-4475