

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION  
ANNUAL REPORT  
**1996**



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

**DOCUMENT # 378809 (8)**  
1. Corporation Name  
**6301, INC.**



Principal Place of Business: **8000E ARMENIA AVE TAMPA FL 33604**  
Mailing Address: **8000E ARMENIA AVE TAMPA FL 33604**

3. Date Incorporated or Qualified: **03/16/1971**      3a. Date of Last Report: **01/20/1995**  
4. FEI Number: **59-1407222**      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

2. Principal Place of Business: 21 State, Apt. #, etc.: 22 City, & State: 23 Zip: 24 Country: 25  
2a. Mailing Address: 26 State, Apt. #, etc.: 27 City, & State: 28 Zip: 29 Country: 30

9. Name and Address of Current Registered Agent  
**ROSENTHAL, V.M., JR.  
8000 EAST ARMENIA AVENUE  
TAMPA, FLA  
33604**

10. Name and Address of New Registered Agent  
81 Name: 82 Street Address (P.O. Box Number is Not Acceptable): 83 City: 84 City: **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.07(4) and 607.13(3), 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 607.05(6), Florida Statutes.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: <b>P</b>	<b>ROSENTHAL, JR VM 3619 N HOWARD AVE TAMPA, FL 00000</b>	TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME: <b>VP</b>	<b>ROSENTHAL, TODD K 3619 N HOWARD AVE TAMPA, FL 00000</b>	TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME: <b>S</b>	<b>ROSENTHAL, MARK S. 8000E ARMENIA AVE TAMPA FL</b>	TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME: <b>T</b>	<b>ROSENTHAL, LISA A. 8000E ARMENIA AVE TAMPA FL</b>	TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: <input type="checkbox"/> DELETE		TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: <input type="checkbox"/> DELETE		TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: <input type="checkbox"/> DELETE		TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: <input type="checkbox"/> DELETE		TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	

14. 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)(a), 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 Book 12 or Book 13 if changed, or on an attachment with an address.

SIGNATURE: *V M Rosenthal* PRESIDENT 1/5/96 813 932-2690  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)