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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 443205

TRANS-WORLD TAMPA CORPORATION

(0)

FILED Jan 22 1997 8:00am Secretary of State

Principal Pla	ce of Business	Marling Address			n jamin misni minde tend hætt bondi olin minn didir bildir bligir didir didir fildit ilkåt	
2702 W. AZEELE ST. TAMPA FL 33609 US		PO BOX 78349-1349 TAMPA FL 33675				
		us			3. Date Incorporated or Qualified 12/31/1973	3a. Date of Last Report 05/01/1996
2. Principal I	Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		59-1499561	Not Applicable	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27		5. Certificate of Status Desired \$8.75 Additional Fee Required		
City & State		City & State		Election Campaign Financing \$5.00 May Be		
Zip Country		28		Trust Fund Contribution Added to Fees		
		Zip	·		8. This corporation has fiability for intangible tax under s. 199.032,	
24	25 9. Name and Address of Curre	29 29 Agent	30		Florida Statutes 10. Name and Address of New Red	Yes No
DEI) FRIEDMAN	iir nagisteleti Agelit	8	1 Name	TO. Name and Address of New Re	gistered Agent
				, same		
2702 W. AZEELE ST. TAMPA FL 33609			82 Street Addre		ress (P.O. Box Number is Not Acceptab	le)
174m	IFA FL 33009		8	4		
			١	1		
			8	4 City		FI 85 Zip Code
11. Pursuani	to the provisions of Sections 607.05	02 and 607 1508. Florida Stati	utes the abo	ve-pamed con	poration submits this statement for the n	
office or	registered agent, or both, in the State	e of Florida. Such change was	authorized	by the corpora	poration submits this statement for the p tion's board of directors. I hereby accep	t the appointment as registered
	a ir ramınar witit, arkı accept the obiq	gations bit Section 607.0505, r	nonda Statut	28.		
SIGNATURE	Signature, typed or pointed name of regishered ag	yor tand the if applicable (NC	OTE: Registered A	pent signature requi	ired when reinstating)	DATE
12.	OFFICERS AN	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	
TITLE	PD	DELETE	1.1 TITUE			Change Addition
NAME	FRIEDMAN, RONALD D.		1.2 NAM			
STREET ADDRESS			1 3 STRE	T ADDRESS		
CITY - S1 - ZIP	TAMPA, FL 00000		1.4 CITY	ST-ZIP		
TITLE	V	DELETE	2.1 TITLE			Change Addition
NAME	TALLENT, AMY		2.2 NAMI			
STREET ADDRESS	2702 W. AZEELE ST.		23 STRE	T ADDRESS	•	
CITY - ST - ZIP	TAMPA, FL 00000		2 4 CITY	· ST-ZIP		
TITLE	ST	DELETE	3 1 TITLE			Change Addition
NAME	FRIEDMAN, REID		32 NAM	:		
STREET ADDRESS	2702 W. AZEELE ST.		3.3 STRE	ET ADDRESS		
CITY-S1-ZIP	TAMPA FL		3.4. CITY	1		
TITLE		DELETE	4 1 TITLE			Change Addition
NAME			4 2 NAM	E		
STREET ADDRESS			43 STRE	T ADDRESS		
CITY - ST - ZIP			4.4 City	ST-ZIP		
TITLE		DELETE	5 1 TITLE			Change Addition
NAME			5.2 NAM			• —
STREET ADORESS			53 STRE	EY ADDRESS		
CITY-ST-ZIP	1		5.4 CiTY			•
Trill		DELETE	61 THTLE			Change Addition

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 if changed, or on an attachment with an address.

64 CITY-ST-ZIP

6.3 STREET ADDRESS

6.2 NAME

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 14, 1997 (813) 875-5599