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

Profit Corporation Annual Report

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 24 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 445900 (4) 1. Corporation Name DIXIE NEON COMPANY, INC.						
Principal Place of Business 808 S. 22ND ST. TAMPA FL 33605		П.	Mailing Address 608 S. 22ND ST. TAMPA FL 33605-6316		e ida bis Arbis ablas arrio salti galti nast	Statu, drair didit arri, didit andır isai
					3. Date Incorporated or Qualified 02/06/1974	3a. Date of Last Report 04/01/1996
	Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21	Suite, Apt	#, etc	Suite, Apt. #, etc.		59-1510869	Not Applicable \$8.75 Additional
22			27		5. Certificate of Status Desired	Fee Required
23	City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
	Zip	Country	Zip	Country	8. This corporation has liability for i	
24		25	29	30	Florida Statutes	Yes No
ļ	000	9. Name and Address of Current	Registered Agent	61 Name	10. Name and Address of New Re	gistered Agent
ROQUE, RAUL 2021 E SEVENTH AVENUE					(DO D. N	1_3
TAMPA FL 33605				82 Street Ad	dress (P.O. Box Number is Not Acceptab	He)
,				83		
				B4 City		FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, 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, or both, in the State of Florida.						
	office or re agent it at	egistered agent, or both, in the State of m familiar with land accept the obliga	of Florida. Such change was tions of, Section 607.0505, F	authorized by the corpor lorida Statutes.	ration's board of directors. I hereby accep	ot the appointment as registered
Sk	GNATURE					
12		Signature, typed or pricted name of registered ager OFFICERS AND		TE: Registered Agent signature rec	quired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRECTORS IN 12
Tit		P	DELETE	1.3 TITLE		Change Addition
NAt	ME	HEVIA, FERNANDO, III		1.2 NAME		
	reet adoress	2914 TIMBER KNOLL DRIVE				j
	917 - 12 - Y1			1.9 STREET ADDRESS		
NA	15	VALRICO FL	☐ DF1FTF	1.4 CITY-ST-ZIP		Chance Addition
	KE ME	ST	DELETE	.,		Change Addition
STE	ł		DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
	ME	ST Carrillo, Lorraine		1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		
CIT 1:11	ME REET ADORESS TY-ST-ZIP LE	ST Carrillo, Lorraine 3901 Cedar Cay Cir.	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE		Change Addition
CIT 1:11 NAI	ME REET ADORESS 1Y-ST-ZIP LE ME	ST Carrillo, Lorraine 3901 Cedar Cay Cir.		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		
EIT FITI NAI STE	ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS	ST Carrillo, Lorraine 3901 Cedar Cay Cir.		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		
EIT FITI NAI STE	ME REET ADDRESS IY-ST-ZIP LE IME REET ADDRESS IY-ST-ZIP	ST Carrillo, Lorraine 3901 Cedar Cay Cir.		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		
CIT BITI NAI STE	ME REET ADDRESS IY-SI-ZIP LE ME REET ADDRESS IY-SI-ZIP LE	ST Carrillo, Lorraine 3901 Cedar Cay Cir.	DELETE	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		Change Addition
CIT BITI NAM STE CIT TITI NAM STE	ME REET ADORESS IY-ST-ZIP LE IME REET ADORESS IY-ST-ZIP LE IME REET ADORESS	ST Carrillo, Lorraine 3901 Cedar Cay Cir.	DELETE	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		Change Addition
CIT TITI NAI STE CII NAI STE	ME REET ADORESS IY-ST-ZIP LE ME REET ADORESS IY-ST-ZIP LE ME REET ADORESS IY-ST-ZIP LE ME REET ADORESS	ST Carrillo, Lorraine 3901 Cedar Cay Cir.	DELETE	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 4.4 CITY-ST-ZIP		Change Addition Change Addition
CIT 1:TI NAI STE CIT NAI STE CIT TITI	ME REET ADORESS IY-ST-ZIP LE IME REET ADORESS IY-ST-ZIP ILE IME REET ADORESS IY-ST-ZIP ILE IME REET ADORESS	ST Carrillo, Lorraine 3901 Cedar Cay Cir.	DELETE	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 4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
CIT 1:11 NAI STE CIT TITI NAI STE TITI NAI NAI NAI NAI NAI	ME REET ADORESS IY-ST-ZIP LE IME REET ADORESS IY-ST-ZIP ILE IME REET ADORESS IY-ST-ZIP ILE IME REET ADORESS	ST Carrillo, Lorraine 3901 Cedar Cay Cir.	DELETE	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 4.4 CITY-ST-ZIP		Change Addition Change Addition
CIT 1:11 NAI STE CIT TITI NAI STE CIT TITI NAI STE STE STE STE	ME REET ADORESS IY-SI-ZIP LE REET ADORESS IY-SI-ZIP LE ME REET ADORESS IY-SI-ZIP LE REET ADORESS IY-SI-ZIP LE	ST Carrillo, Lorraine 3901 Cedar Cay Cir.	DELETE DELETE	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 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME		Change Addition Change Addition
CIT HITE NAME STE CIT THE STE CIT HAD STE CIT TITE TITE TITE CIT TITE TITE CIT TIT TITE CIT TITE CIT TITE CIT TITE CIT TIT TIT TIT TIT TIT TIT TIT TIT TIT	ME REET ADDRESS ITY-ST-ZIP LE REET ADDRESS ITY-ST-ZIP LE ME REET ADDRESS ITY-ST-ZIP LE IME REET ADDRESS ITY-ST-ZIP LE IME REET ADDRESS ITY-ST-ZIP LE IME	ST Carrillo, Lorraine 3901 Cedar Cay Cir.	DELETE	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 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition Change Addition
CIT 1:11 NAI STE CIT TITI NAI	ME REET ADDRESS ITY-ST-ZIP LE REET ADDRESS ITY-ST-ZIP LE ME REET ADDRESS ITY-ST-ZIP LE IME REET ADDRESS ITY-ST-ZIP LE IME REET ADDRESS ITY-ST-ZIP LE IME	ST Carrillo, Lorraine 3901 Cedar Cay Cir.	DELETE DELETE	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 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		Change Addition Change Addition Change Addition

SIGNATURE: SUMME COMMISSION DE CONTROL DE CO

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 or an attachment with an address.