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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 461116

(6)

Mailing Address

JOHN P. PILARCZYK, D.V.M., P.A.

FILED Jan 28 1997 8:00am Secretary of State

8410 EAST TEMPLE TERRACE HIGHWAY TEMPLE TERRACE FLORIDA 33637-5808		8410 EAST TEMPLE TERRACE HIGHWAY TEMPLE TERRACE FLORIDA 33637-5808								
						1			ate of Last Report 30/1996	
<u> </u>	Place of Business	2a. Mailing Address	Mailing Address			4. FEI Number			Applied For	
21		26			59-1551382			Not Applicable		
Suite, Apt	t #, etc	Suite, Apt. #, etc. 27			5. Certificate of Status Desired		\$8.75 Additional Fee Required			
City & Sta 23	ate	City & State	28			Election Campaign Financing Trust Fund Contribution	S \$5.00 May Be Added to Fees			
Zip 24	Country 25	Z _I p 29	29 30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No				
	9. Name and Address of Curr	ent Registered Agent		A . T		10, Name and Address of New Re	istered A	gent		
PIL	ARCZYK, JOHN P.			81	Name					
8410 EAST TEMPLE TERRACE HIGHWAY TEMPLE TERRACE FLORIDA				82	Street Add	ress (P.O. Box Number is Not Acceptab	le)			
	THE INTERPRETATION			83						
				84	City	, , , , , , , , , , , , , , , , , , , ,	FL	85 Zi	p Code	
11. Pursuan	t to the provisions of Sections 607.0	502 and 607 1508, Florida Sta	tutes, the al	bove	-named corp	poration submits this statement for the p	urnose of	changing	its registered	
office or	registered agent, or both, in the Sta am familiar with, and accept the ob-	ite of Florida. Such change wa	is authorize	d by	the corpora	ition's board of directors. I hereby accep	ithe app	ointment.	as registered	
Ü	,	rganona or, occitor por occu,	rionaa ota	10103	•					
SIGNATURE	Stgratice typed or protect name of registered	agout and title if applicable (f	NOTE: Registere	o Ager	nt signature requ	ired when reinstating)	DATE			
12.	OFFICERS A	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECT	ORS IN 12	
TITLE	PD	DELETE	1,1 1	TLE				Chang	e Addition	
NAMÉ	PILARCZYK, JOHN P.		1.2 N	AME)					
STREET ADDRESS	T44 0400400		135	TREET	ADDRESS	•				
CITY - ST - ZIP	TEMPLE TERRACE FL		140	HY-\$1	r-ziP					
TOLE	D	DELETE	21 TI					Chang	e 🔲 Addition	
NAME	PILARCZYK,KATHLEEN A.		2.2 N	AME						
STREET ADDRESS			235	TREET	ADDRESS					
CITY-ST-7iP	TEMPLE TERRACE FL		I	CITY-S						
TiTLE	T	DELETE	3.1 TI		1-211			Chang	e 🔲 Addition	
NAME	PILARCZYK, JOHN P.	tund Property	3.2 N		}					
	E44 0400400				ADDRESS					
STREET ADORESS	TEMPLE TERRACE FL			CITY-S	1					
CITY - ST - ZIP	S	DELETE	3.4. L 4.1 Ti	_	11 - ZIF		 	Chang	e 🗌 Addition	
l	PILARCZYK,KATHLEEN A.		4.11					THE PERSON	- La redución	
NAME CANCEL AND DOOR	*** 0100100		4		ADDRESS					
STREET ADDRESS	TEMPLE TERRACE FL	·		ITY-SI	· ·					
CITY - ST - ZIP TITLE	P P	DELETE	5.1 TI		I ~ ZIF			Chang	e Addition	
	PILARCZYK, JOHN P.									
NAM 			52 N		ADDOCOD.					
STREET ADDRESS			1		ADDRESS					
CITY - ST - ZIP	TEMPLE TERRACE FL	DELETE		ITY-S	I - ZIP			Chang	e	
TITLE				6.1 TITLE 6.2 NAME				m chang	k TT VOUIDU	
NAME	PILZRCZYK, KATHLEEN A.									
STREET ADDRESS					ADDRESS					
CHTY-ST-ZIP	TEMPLE TERRACE FL		6.4 C	ITY-S	r-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 Block 13 if changed or open a weightness.

SIGNATURE:

SANATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

120/97

813-985676) Daytime Phone #