		E AFTER MAY 1	<del></del>					
PROFIT FLORIDA DEPARTMENT OF STATE								
CORPORATION Sandra B. Mortham ANNUAL REPORT					1			
Secretary of State								
1996 DIVISION OF CORPORATIONS								
DOCUMENT # 502495 (5)								
FREDC	O, INC.							
					# 1 <b>63791 9</b> 1311 <b>86</b> 168 11811 <b>0</b> 1068 18181	NIK BIBN BAB		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Principal Place	of Business	Mallan Add						
·		Mailing Address						
P.O. BOX 1321 P.O. BOX 1321 TAMPA FL 33601 TAMPA FL 33601								
				3. Date incorporated or Qualified 3a		To out	la. Date of Last Report	
					05/01/1976		2/24/19	
	ace of Business	2a. Mailing Address			4. FEI Number	J	,_ ,, ,,	Applied For
26   Suite, Apt. #, etc.   Strite, Apt. #, etc.   Strite, Apt. #, etc.					59-1667250			Not Applicab
Suite, Apt. #, etcSuite, Apt. #, etc					5. Certificate of Status Desired			5 Additional Required
City & State City & State					6. Election Campaign Financing			00 May Be
7in Country 7					Trust Fund Contribution		Add	ed to Fees
Zip 4]	Country 25	Zip [ <b>29</b> ]	Gour	ntry	8. This corporation has flability for in Florida Statutes X Yes		x under	s 199.032
	9. Name and Address of Curr		1301		10. Name and Address of New Ro		Agent	
				81 Name				
UITERWYK, STEVEN A. 1307 W KENNEDY BLVD				82 Street Address (P.O. Box Number is Not Acceptable)				
TAMPA F			-	83		· · · · · · · · · · · · · · · · · · ·		
17 WHI 7 C I	£ 00000							
				B4 City		FL		Zip Code
				e-named corpo	oration submits this statement for the purp ard of directors. I hereby accept the appo		nging its	registered offi
familiar wit	th, and accept the obligations of, Se	ction 607.0505, Florida Statutes	ed by the co s.	orporauori s bo	ard of directors. I hereby accept the appo	intment as	registere	d agent. I am
SIGNATURE _	Signature typed or printed name of registereo age	and and the ingredent	SV: 6	lgerit signature requi				
12.	OFFICERS A	ND DIRECTORS	13,	agent signature requi	ADDITIONS/CHANGES TO OFFIC	DATE DERS AND	DIRECT	ORS IN 12
TITLE	STD	☐ DELETE	1. 1 TiTi	LE			] Change	
NAME	EDGE, CECIL E		1.2 NAN					
STREET ADDRESS	1307 W KENNEDY BLVD. TAMPA FL		1	EET ADDRESS				
CITY-ST-ZIP DITLE	VD VD	F) no ete		r - ST - ZIP				
NAME	FERMAN, J L, JR.	DELETE	2 1 7(1)				]] Change	Addition
TREET ADDRESS	1307 W KENNEDY BLVD.		2.2 NAM 2.3 STR	AL ELT ADDRESS				
HTY-ST-ZIP	TAMPA FL			FET ADDRESS				
ITLE	STD	DELETE	3.1 TITL				] Change	Addition
AME	UITERWYK, STEVEN A.	breat	3.2 NAW			L	" oumide	☐ vogition
TREET ADDRESS	1307 W KENNEDY BLVD.			REET ADDRESS				
ITY-ST-ZIP	TAMPA FL		3.4 CITY	r-S1-ZIP				
TITLE		DELETE	4. 1 TITE				Change	Addition
LAME			4.2 NAM	!E				
l l								
STREET ADDRESS								

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this fiting is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 exemption 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 chapted, or on an attachment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE:

SIGNATURE:

SIGNATURE:

SIGNATURE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5 1 TITLE

5.2 NAME

6. 1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CHY-ST-ZIP

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

DELETE

DELETE

Change

Change

Addition

☐ Addition