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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 533742

1. Corporation Name

BUSCH JUNCTION, INC.

Principal Place of Business

Mailing Address

## **FILED** Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90087 035 \*\*\*150.00



14524 NORTH ROME AVENUE 1701 E BUSCH BLVD TAMPA FL 33613-2029 TAMPA FL 33612 US			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed	
				05/16/1977
— <i>-</i>	ace of Business	2a. Mailing Address	7	4. FEI Number Applied For
21 701			sch Bluc	59-1787072   Not Applicable
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired
City & State	23613	City & State	FL	6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees
Zip	Country	Zip 33(0/)	Country 1	8. This corporation owes the current year Intangible Personal Property Tax. Yes No
24 336	<u>,                                    </u>	144	00,,	10. Name and Address of New Registered Agent
04 Nove 20 44				
CRECO IDAN				
1701 E BUSH BLVD  82 Street Address (P.O. Box Number is Not Acceptable)  1701 E BUSH BLVD				
TAMPA FL 33612				101 E. Descri Boulevaria
			84 City	7 FL 85 Zip Code 33612
11 Purcuant	to the provisions of Sections 607 0502	and 607 1508. Florida Statutes, th	o above-named co	progration submits this statement for the purpose of changing its registered
office or registered agent, or both, in the State of Florida. Such engage 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 607.0505, Florida Statutes.				
SIGNATURE Signature, typed or printed name of registered agent and the [Lapplicable. (NOTE: Registered Agent signature required when reinstating)  DATE				
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	VD	☐ DELETE	1.1 TITLE	Change Addition
NAME	CASTRO, MARY J.		I.2 NAME	Castro, Mary 70
STREET ADDRESS	14524 N. ROME AVENUE		1.3 STREET ADDRESS	1701 E. Busch Blad
CITY-ST-ZIP	TAMPA FL		1.4 CITY-ST-ZIP	Tampa FL 33612
TITLE	VD	☐ DELETE	2.1 TITLE	S/D Addition
NAME	GRECO, JO ANN	:	2.2 NAME .	i Greco. Jo Ann
STREET ADDRESS	14524 N. ROME AVENUE		2.3 STREET ADDRESS	1701-E. Busch-Blird
CITY-ST-ZIP	TAMPA FL	:	2.4 CITY-ST-ZIP	Tampa, FL 33612
TITLE	VD	☐ DELETE	3.1 TITLE	Change Addition
NAME	GRECO, LINDA JO		3.2 NAME	Askins, Linda Jo,
STREET ADDRESS	14524 N. ROME AVENUE	:	3 STREET ADDRESS	1701 E. Busch Blvd
CITY-ST-ZIP	TAMPA FL	:	3.4 CITY-ST-ZIP	Tampa FL 33612
TITLE	VD	☐ DELETE	1.1 TITLE	P/D Change Addition
NAME	GRECO, CYNTHIA MARIE		1.2 NAME	Mroczkowski, Cynthia G.
STREET ADDRESS	14524 N. ROME AVENUE	· · · · · · · · · · · · · · · · · · ·	4.3 STREET ADDRESS	1701 E. Busch Bird.
CITY-ST-ZIP	TAMPA FL		4.4 CITY-ST-ZIP	Tampa, FL 33612
TITLE	PD	DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	GRECO, JOHN		5.2 NAME	·
STREET ADDRESS	14524 N. ROME AVE.		5.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL		5.4 CITY-ST-ZIP	
TITLE			6.1 TITLE	☐ Change ☐ Addition
NAMÉ			6.2 NAME	
STREET ADDRESS		į,	6.3 STREET ADDRESS	{

14. I 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 appreciate with all other like empowered.

G. Wroczkowski