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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 22 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

600500

(3)

REINA, PITISCI & ASSOCIATES, P.A.

Lam an officer or director of the corporation perfit appears in Block 12 or Block 13 if changed, or d

SIGNATURE:

Principal Place	e of Business	Ma∂ing Address				a dennis soure soure soure sites soult sour soult soult sites sites substitutes			
2506 W VIRGII TAMPA FL 336		2506 W VIRGINIA AVENUE TAMPA FL 33607-6326							
						3. Date Incorporated or Qualified 10/16/1968		te of Last R 30/1996	Report
2. Principal Pi	ace of Business	2a. Mailing Address				4. FEI Number	1		pplied For
21		26			59-1223481 Not Applicable			ot Applicable	
Suite, Apt	#, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75	Additional
22		27				Certificate of Status Desired	L!	Fee Fi	equired
City & State	•	City & State				6. Election Campaign Financing	* · · · · · · · · · · · · · · · · · · ·		
23	28				Trust Fund Contribution			to Fees	
Zip j				untry		8. This corporation has liability for			. 199.032,
24	25	29	30	· · · · · ·	····			_] No	
	9. Name and Address of Current	registered Agent		81	Name	10. Name and Address of New R	gistered A	- Agent	
	NA, DOMENICK P MD 8 W VIRGINIA AVENUE			"	Maine				
		82 Street Ac			Address (P.O. Box Number is Not Acceptable)				
IAN	IPA FL 33607			83					
_									
•				84	City		FL	85 Zip	Code
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	tes, the a	bove	named co	rporation submits this statement for the	nurrose of	changing i	ts registered
office or re	egistered agont, or both, in the State in taxilism with and accept the obliga-	of Florida. Such change was trong of Section 607,0505, £1	authorize ⊶ida Sta	d by	the corpora	ation's board of directors. I hereby acce	pt the appr	ointment as	registered
	(1)	Trasmer O		_	soc_	1/8/97			
SIGNATURE	Significated types or printed number of regulational agree	t are the if applicable (NOI	II. Bagistere			uiteo when reinstating)	DATE		
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFI	CERS AND	DIRECTOF	S IN 12
TITLE	PD DELETE		1.17	1.1 TITLE				Change	Addition
NAME:	reina, domenick p.		1.2 N	.2 NAME					
STREET ADDRESS	2506 W VIRGINIA AVENUE	1.33		1.3 STREET ADDRESS					
CITY - S1 - 7/P	TAMPA FL		1.4 0	aty-s	T- ŽIP				
THTLE	VD DELETE		217	ITLE				Change	Addition
NAME	PITISCI, DONALD F	2.3		2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP					
STREET ADDRESS	2506 W VIRGINIA AVENUE								
CITY - S1 - 7IP	TAMPA FL								
TITLE	TD DELETE		317	ITLE	· · · · · · · · · · · · · · · · · · ·		Change Addition		
NAME	PESCE, ROBERT, J		32N	AME					
STREET ADDRESS			3.3 S	3.3 STREET ADDRESS					
CITY - ST - ZIP	TAMPA FL		34 (CITY-5	IT- ZIP				
HILE	SD	DELETE	4.1 7	ITLE				Change	Addition
NAME	MOOK SANG, BRENT, D		4 2 1	NAME					
STREET ADDRESS	2506 W VIRGINIA AVE		4.3 STRE		ADORESS				
CITY - ST - 20P	TAMPA PI		4 CITY-ST-ZIP						
TOLE		DELETE	51T					Change	Addition
NAME				5 2 NAME. 5 3 STREET ADDRESS		900002066389 -01/23/9701054039			
STREET ADDRESS			538						
CITY-ST-ZIP				:ITY-S		***165.00		,,,	
TILE		☐ DELETE	617			***************************************		Change	Addition
NAME			62 N						67
STREET ADDRESS					ADDRESS			J	1-000
CHV. ST. 740			640	ייייייי	Y 310				. Mr.

14. Ido 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name