

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

95 JAN 25 PM 2:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 601033

(4)

1. Corporation Name

BIEMER, PACKER & CARTA, P.A.

Principal Place of Business

3001 WEST BUFFALO AVENUE
TAMPA FL 33607

Mailing Address

3001 WEST BUFFALO AVENUE
TAMPA FL 33607

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
05/27/1969

3a. Date of Last Report
02/01/1994

4. FEI Number
59-1263616

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 190.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 3001 W. DR. M.L. KING JR. BLVD

26 3001 W. DR. M.L. KING JR. BLVD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

23 TAMPA FL

28 TAMPA FL

Zip Country

Zip Country

24 33607

25

29 33607

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BIEMER, JAMES J.
3001 W. BUFFALO AVE.
TAMPA FL 33607

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

3001 W. DR. M.L. KING JR. BLVD

83

84 City TAMPA

FL

85 Zip Code 33607

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 office or 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when consenting)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	SD
NAME	BIEMER, JAMES J.
STREET ADDRESS	3001 W. BUFFALO AVENUE
CITY - ST - ZIP	TAMPA FL
TITLE	PD
NAME	CARTA, MANUEL A.
STREET ADDRESS	3001 W. BUFFALO AVE.
CITY - ST - ZIP	TAMPA FL
TITLE	TD
NAME	TAYLOR, FRANK M.
STREET ADDRESS	3001 W. BUFFALO AVENUE
CITY - ST - ZIP	TAMPA FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	3001 W. DR. M.L. KING JR. BLVD
1.4 CITY - ST - ZIP	TAMPA, FL 33607
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	3001 W. DR. M. L. KING JR BLVD
2.4 CITY - ST - ZIP	TAMPA, FL 33607
3.1 TITLE	☒ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	3001 W. DR. M.L. KING JR BLVD
3.4 CITY - ST - ZIP	TAMPA, FL 33607
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 register 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 address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #