

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

**FILED**  
**Apr 28 1997 8:00am**  
**Secretary of State**

PROFIT CORPORATION  
 ANNUAL REPORT  
**1997**



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

**DOCUMENT #** *F06893*  
 Corporation Name: *2923 P.J.S., INC.*



Principal Place of Business: **10005 N FLORIDA AVE TAMPA FL 33612**  
 Mailing Address: **10005 N FLORIDA AVE TAMPA FL 33612-7410**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>08/27/1986</b>		3a. Date of Last Report	
21. State, Apt. #, etc.		26. State, Apt. #, etc.		4. FEI Number <i>59-2054501</i>		Applied For Not Applicable	
22. City & State		27. City & State		5. Certificate of Status Desired <input checked="" type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
23. Zip		28. Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
24. Country		29. Country		7. This corporation has liability for intangible tax under Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		8. 199 032	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
<b>PALORI, PETE A</b> <b>10005 N FLORIDA AVE</b> <b>TAMPA FL 33612</b>				81. Name			
				82. Street Address (P.O. Box Number is Not Acceptable)			
				83.			
				84. City			

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 of this corporation and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1 NAME: <b>PALORI, PETE A</b>	<input type="checkbox"/> DELETE	13.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.2 STREET ADDRESS: <b>10005 N FLORIDA AVE</b>		13.2 NAME	
12.3 CITY, ST, ZIP: <b>TAMPA FL 33612</b>		13.3 STREET ADDRESS	
12.4 TITLE	<input type="checkbox"/> DELETE	13.4 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.5 NAME		13.5 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.6 STREET ADDRESS		13.6 NAME	
12.7 CITY, ST, ZIP		13.7 STREET ADDRESS	
12.8 TITLE	<input type="checkbox"/> DELETE	13.8 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.9 NAME		13.9 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.10 STREET ADDRESS		13.10 NAME	
12.11 CITY, ST, ZIP		13.11 STREET ADDRESS	
12.12 TITLE	<input type="checkbox"/> DELETE	13.12 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.13 NAME		13.13 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.14 STREET ADDRESS		13.14 NAME	
12.15 CITY, ST, ZIP		13.15 STREET ADDRESS	
12.16 TITLE	<input type="checkbox"/> DELETE	13.16 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.17 NAME		13.17 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.18 STREET ADDRESS		13.18 NAME	
12.19 CITY, ST, ZIP		13.19 STREET ADDRESS	
12.20 TITLE	<input type="checkbox"/> DELETE	13.20 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.21 NAME		13.21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.22 STREET ADDRESS		13.22 NAME	
12.23 CITY, ST, ZIP		13.23 STREET ADDRESS	
12.24 TITLE	<input type="checkbox"/> DELETE	13.24 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.25 NAME		13.25 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.26 STREET ADDRESS		13.26 NAME	
12.27 CITY, ST, ZIP		13.27 STREET ADDRESS	
12.28 TITLE	<input type="checkbox"/> DELETE	13.28 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.29 NAME		13.29 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.30 STREET ADDRESS		13.30 NAME	
12.31 CITY, ST, ZIP		13.31 STREET ADDRESS	
12.32 TITLE	<input type="checkbox"/> DELETE	13.32 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.33 NAME		13.33 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.34 STREET ADDRESS		13.34 NAME	
12.35 CITY, ST, ZIP		13.35 STREET ADDRESS	
12.36 TITLE	<input type="checkbox"/> DELETE	13.36 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.37 NAME		13.37 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.38 STREET ADDRESS		13.38 NAME	
12.39 CITY, ST, ZIP		13.39 STREET ADDRESS	
12.40 TITLE	<input type="checkbox"/> DELETE	13.40 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.41 NAME		13.41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.42 STREET ADDRESS		13.42 NAME	
12.43 CITY, ST, ZIP		13.43 STREET ADDRESS	
12.44 TITLE	<input type="checkbox"/> DELETE	13.44 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.45 NAME		13.45 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.46 STREET ADDRESS		13.46 NAME	
12.47 CITY, ST, ZIP		13.47 STREET ADDRESS	
12.48 TITLE	<input type="checkbox"/> DELETE	13.48 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.49 NAME		13.49 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.50 STREET ADDRESS		13.50 NAME	
12.51 CITY, ST, ZIP		13.51 STREET ADDRESS	
12.52 TITLE	<input type="checkbox"/> DELETE	13.52 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.53 NAME		13.53 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.54 STREET ADDRESS		13.54 NAME	
12.55 CITY, ST, ZIP		13.55 STREET ADDRESS	
12.56 TITLE	<input type="checkbox"/> DELETE	13.56 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.57 NAME		13.57 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.58 STREET ADDRESS		13.58 NAME	
12.59 CITY, ST, ZIP		13.59 STREET ADDRESS	
12.60 TITLE	<input type="checkbox"/> DELETE	13.60 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.61 NAME		13.61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.62 STREET ADDRESS		13.62 NAME	
12.63 CITY, ST, ZIP		13.63 STREET ADDRESS	
12.64 TITLE	<input type="checkbox"/> DELETE	13.64 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.65 NAME		13.65 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.66 STREET ADDRESS		13.66 NAME	
12.67 CITY, ST, ZIP		13.67 STREET ADDRESS	
12.68 TITLE	<input type="checkbox"/> DELETE	13.68 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.69 NAME		13.69 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.70 STREET ADDRESS		13.70 NAME	
12.71 CITY, ST, ZIP		13.71 STREET ADDRESS	
12.72 TITLE	<input type="checkbox"/> DELETE	13.72 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.73 NAME		13.73 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.74 STREET ADDRESS		13.74 NAME	
12.75 CITY, ST, ZIP		13.75 STREET ADDRESS	
12.76 TITLE	<input type="checkbox"/> DELETE	13.76 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.77 NAME		13.77 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.78 STREET ADDRESS		13.78 NAME	
12.79 CITY, ST, ZIP		13.79 STREET ADDRESS	
12.80 TITLE	<input type="checkbox"/> DELETE	13.80 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.81 NAME		13.81 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.82 STREET ADDRESS		13.82 NAME	
12.83 CITY, ST, ZIP		13.83 STREET ADDRESS	
12.84 TITLE	<input type="checkbox"/> DELETE	13.84 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.85 NAME		13.85 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.86 STREET ADDRESS		13.86 NAME	
12.87 CITY, ST, ZIP		13.87 STREET ADDRESS	
12.88 TITLE	<input type="checkbox"/> DELETE	13.88 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.89 NAME		13.89 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.90 STREET ADDRESS		13.90 NAME	
12.91 CITY, ST, ZIP		13.91 STREET ADDRESS	
12.92 TITLE	<input type="checkbox"/> DELETE	13.92 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.93 NAME		13.93 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.94 STREET ADDRESS		13.94 NAME	
12.95 CITY, ST, ZIP		13.95 STREET ADDRESS	
12.96 TITLE	<input type="checkbox"/> DELETE	13.96 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.97 NAME		13.97 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12.98 STREET ADDRESS		13.98 NAME	
12.99 CITY, ST, ZIP		13.99 STREET ADDRESS	
12.100 TITLE	<input type="checkbox"/> DELETE	14.00 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I, the undersigned, certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information contained 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 provided, or on an attachment with an address.

SIGNATURE: *Pete Palori* 4/17/97 (917) 930-9069

CF-ED34 (9/96)