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

PROFIT CORPORATION ANNUAL REPORT



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

1996

(9)

DOCUMENT #
1. Corporation Name

FLORIDA MARKET LEADERS, INC.



Principal Diago	of Pusiness	Molling Address				Liaminam nikt (mimm sivink navid navid nami kidir mimri dinir bidir kidir kidir kidir kidir kidir kidir ki		
Principal Place of Business 3909 BARCELONA STREET			Mailing Address					
3909 BARC TAMPA FL			3909 BARCELONA STREET TAMPA FL 33629					
		VIII // 02 00020				3. Date incorporated or Qual-field 3a. Date of Last Report 06/04/1982 01/19/1995		
2. Principal Pla	ice of Business	2a. Mailing Address	2a. Mailing Address 26			4. FF Number Applied For Not Applied For		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	- 			\$8.75 Additional		
22		27	27			5. Certificate of Status Desired Fee Required		
City & State		City & State	h			6. Election Campaign Financing \$5.00 May Be		
23		28		<u>-</u>		Added to Fees		
Zip 24	Country 25	Ζip	— <u> </u>	untry	•	8. This corporation has liability for intangitule tax under s. 199.032, Florida Statutes Yes No.		
24	9. Name and Address of Cu	rrent Registered Agent	30	T		Florida Statutes Yes No 10. Name and Address of New Registered Agent		
	0			81	Name	10. Halle and Addices of Hole registered Agent		
FOX.	\LBERT					70 C Day 1 1 No. 2		
	BARCELONA ST.			82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
TAMPA	\ FL 33629			83		The second secon		
				84	City	loc 2-0-4		
				64	City	FL 85 Zip Code		
familiar wit SIGNATURE	h, and accept the obligations of, S	Section 607.0505, Florida Statut	es.			rd of directors. I hereby accept the appointment as registered agent. I am		
12.	Signature, typed or printed name of registered OFFICERS	agent and the mappicable AND DIRECTORS	NOIE: Hegislere 13.	d Ager	nt signature; required	twise remaining? ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TILE	DV	DELETE	1 1	TETE F		Change Addition		
NAME	FOX, ALBERT		121					
STREET ADDRESS	3909 BARCELONA STR	EET			ADDRESS			
CITY - ST - ZIP	TAMPA FL				iT - ZiP			
TITLE	D	☐ DELETE	2 1			Change Addition		
NAME	MUSSO, NICHOLAS G		22 N	IAME				
STREET ADDRESS	3909 BARCELONA STR	EET	238	TREET	ADDRESS			
CITY-ST-ZIP	TAMPA FL		240	ITY-Ş	T-ZIF			
TITLE		☐ DELETE	3 1 '			☐ Change ☐ Addition		
NAME			351					
STREET ADDRESS			ľ		ADDRESS			
CHTY-ST-ZIP TITLE		DELETE	3.4 C 4. 1 T	ITY - S	1 - ZIP	☐ Change ☐ Addition		
NAME			4. 1 1 4.2 N			Criange Addition		
STREET ADDRESS					ADDRESS			
CITY-ST-ZIF					T-ZIP			
TITLE		☐ DELETE	5 1 1			Change Addition		
NAME		_	52 N					
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP				ITY - S				
TITLE		☐ DELETE	6 1 1			Change Addition		
NAME			62 N	AME				
STREET ADDRESS			635	TREET	ADDRESS			
CITY-ST-ZIP			640	TY-S	I - ZIF			
14. Ldo hereby	certify that the information suppli	ied with this filing is voluntarily for				or the exemption stated in Section 119.07(3)/k). Florida Statutes, Literther.		

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 eath; 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 address.

SIGNATURE: SIGNATURE AND TYPED OF PRINT

1/11/96 (813)839-5830