FILE NOW: FILING FEE AFTER MAY 1 IS \$550

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT - STATE

FILED

Feb 21 1997 8:00am

Secretary of State

Sandra B. Morth

Secretary of State DIVISION OF CORPORATIONS

SIGNATURE:

DOCUMENT # F89165

(7)

City & State City &	SCOTT	MCWILLIAMS MARKETING	SERVICES, INC.		:			
TAMPA FL 35002 TAMPA FL 35002	Principal Place	e of Business	Mailing Address			-	/ 6 46 616 6 76 1 66	
2. Principal Place of Business	100 MADISON #102		100 MADISON #102	100 MADISON #102				
Sulfo, Apr. 4, etc. Sulfo, Apr. 4, etc.	O Deinoinal Di					07/01/1982	05/01/199	6
Solicy & State Solicy & Solicy	—		├─ ┐ ਁ				} -	
Colly & State Colly & State								
22 20 20 20 20 20 30 20 30 3	22		<u> </u>	27		5. Certificate of Status Desired	1907	
28	₁)	····	,		6. Election Campaign Financing	\$5.0	00 May Be
28		Country		Country			☐ Adde	ed to Fees
HINES, JAMES P 315 HYDE PARK AVE TAMPA FL 38606 11. Pursuant to the provisions of Socions 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. are transfer with, and accept the obligations of, Section 607 0505 of both and the Statute of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. The statement of the purpose of changing its registered agent. The statement of the purpose of changing its registered agent. The statement of the purpose of changing its registered agent. The statement of the purpose of changing its registered agent. The statement of the purpose of changing its registered agent. The statement of the purpose of changing its registered agent. The statement of the purpose of changing its registered agent. The statement of the purpose of changing its registered agent. The statement of the purpose of changing its registered agent. The statement of the purpose of changing its registered agent. The statement of the purpose of changing its registered agent. The statement of the purpose of changing its registered agent. The statement of the purpose of changing its registered agent. The statement of the purpose of changing its registered agent. The statement of the purpose of changing its registered agent. The statement of the purpose of changing its registered agent. The statement of the purpose of changing its registered agent. The statement agent		· · · · · ·	<u>├</u> ─┐		1			ir s. 199,032,
TITLE POPULATION OF DELETE 1.1 PLES TO CHange Delete				30	i,			
## STEET ADDRESS OF TAMPA FL 38000 ## STEET ADDRESS OF SET ADDRES	HIN	ES, JAMES P		Name	***************************************			
TAMPA FL 33808 83	315	HYDE PARK AVE		82	Street Addre	ass (P.O. Box Number is Not Acceptal	ole)	
11. Pursuant to the provisions of Sections 607 0500 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 admit and remailer with, and accept the obligations of, Section 607 0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent admit and remailer with, and accept the obligations of, Section 607 0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent admit agent and the corporation's board of directors. I hereby accept the appointment as registered agent ag	TAM	IPA FL 33606		į.	1	to the man common or constrained	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
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 registers of lice 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, 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 and accept the obligations of, Section 607.0506, Florida Statutes. SIGNATURE Signature in familiar with, and accept the obligations of, Section 607.0506, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE MCWILLIAMS, SCOTT 11. INTE MCWILLIAMS, SCOTT 11. INTE MCWILLIAMS, SCOTT 11. STREET ADDRESS CITY. ST. 2/P TITLE DELETE 2. INT. ST. 2/P 1.4 CITY. ST. 2/P 1.4 CITY. ST. 2/P 1.5 JULICENNE AVE 2.2 NAME STREET ADDRESS CITY. ST. 2/P 1.6 LITY. ST. 2/P 1.7 LITY. ST. 2/P 1.8 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Change Additional Control of Change Additional C				83				
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-hamed corporation submits this statement for the purpose of changing its registers of gent in familiar with, and accept the obligations of, Section 607.6505, Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE TITLE TITLE MCWILLAMS, SCOTT TAMPA FL 11. DELETE 11. TITLE MCWILLAMS, SCOTT TAMPA FL 12. TAMPA FL 13. STREET ADDRESS CITY-S1-2/P TAMPA FL 14. CITY-S1-2/P TITLE DELETE 31. TITLE DELETE				84	City	· · · · · · · · · · · · · · · · · · ·	- 85 Z	ip Code
SIGNATURE Signature, typed or printed mane of registerial giant and time if application MOVIE Registered Agent alignature regulared when reinstating) DATE	11 Pursuant I	to the provisions of Spetions 607.05	02 and 607 1608 Florida Statute	the above	named sorry	available authority ship glatament for the		- 140
SIGNATURE Signature, typed or printed mane of registerial giant and time if application MOVIE Registered Agent alignature regulared when reinstating) DATE	office or re	egistered agent, or both, in the State	e of Florida. Such change was a	uthorized by	the corporation	on's board of directors. I hereby acce	outpose or changing pt the appointment	g its registered as registered
Signature, types of a printed name of requisered algorit and one if anapticable PADE Repositioned Agent aignature requised when reinstating)		n familiar with, and accept the oblig	gations of, Section 607.0505, Fig.	rida Statutes.	• '			-
12.	SIGNATURE.	Signature, typed or printed name of registered ac	pent and tide if applicable (NOTE	: Registered Ager	nt signature require	ed when reinstatinol	DATE	
NAME STREET ADDRESS STOLLOERNE AVE 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP TAMPA FL 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 1.4 CITY-ST-Z	12.	OFFICERS AN	ND DIRECTORS					ORS IN 12
STREET ADDRESS			☐ DELETE	1.1 TITLE			☐ Chang	ge 🔲 Addition
TAMPA FL								
TITLE		TAMPA EI						
NAME		IAMPA PL	DELETE		<u> </u>	·	FT Observ	- T Addison
2.3 STREET ADDRESS 2.4 CTY-ST-ZIP 3.4 CTY-ST-ZIP 3.5 CTY-ST-ZIP 3.6 CTY-ST-ZIP 3.6 CTY-ST-ZIP 3.7 CTY-ST-ZIP 3.8 CTY-ST-ZIP			L.J Deceie				L_1 Chang	He LIODIDON L
City St - ZiP	1				annheee			
TITLE	į.							
NAME			DELETE		1.47		Chanc	ne Addition
STREET ADDRESS	NAME				-		name of the o	
DELETE D	STREET ADDRESS				ADDRESS			
DELETE	C)TY-ST-ZIP				· 1			
STREET ADDRESS 4.3 REET ADDRESS	TITLE		DELETE			**************************************	☐ Chanç	ge 🔲 Addition
City-St-ZiP	NAME			4. SE AME				
DELETE	STREET ADDRESS			4.3 REET /	ADDRESS			
NAME					1-21P			
STREET ADDRESS			L_ DELETE	1 - 1			LJ Chang	ge 🔲 Addition
DELETE DELETE Change Addition Addi								
TITLE DELETE 6. TLE Change Addition NAME 6. ME								
NAME 6, ME	·		DELETE		i- MP		Chang	noitibba 1 Ac
			- verie		·			R L AUGILION
STREET ADDRESS 6 REET ADDRESS	STREET ADDRESS				ANNOTES			
CITY-ST-ZIP	1				1			
14. I do hereby certify that the information supplied with this filing does not qualify for information indicated on this annual report or supplemental annual report is true are countile and that my signature shall have the same legal effect as if made under oath; the same legal effect as i	14. I do hereb	y certify that the information supplie	ed with this filing does not qualify	V lov	heteta noilom	in Section 119.07(3)(i), Florida Statute	s. I further certify th	nat the