

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR -4 PM 11:54

DOCUMENT # G14012 (0)

1. Corporation Name

CREDIT GUARD INTERNATIONAL, INC.

Principal Place of Business

250 MIRROR LAKE DR. N.
ST. PETERSBURG FL 33701

Mailing Address

250 MIRROR LAKE DR. N.
ST. PETERSBURG FL 33701

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/20/1982

3a. Date of Last Report

07/18/1994

2. Principal Place of Business

21 ONE PROGRESS PLAZA

2a. Mailing Address

26 ONE PROGRESS PLAZA

Suite, Apt. #, etc.

22 SUITE 2210

Suite, Apt. #, etc.

27 SUITE 2210

City & State

23 ST. PETERSBURG, FL

City & State

28 ST. PETERSBURG, FL

Zip

24 FL 33701

Country

25 PINELLAS

Zip

29 33701

Country

30 PINELLAS

4. FEI Number

59-2253861

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

KUCERA, DEAN E.
250 MIRROR LAKE DR. N.
ST. PETERSBURG FL 33701

10. Name and Address of New Registered Agent

81 Name

DEAN E. KUCERA

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

ONE PROGRESS PLAZA

83 SUITE 2210

84 City

ST. PETERSBURG

FL

85 Zip Code

33701

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

Dean E. Kucera

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

(NOTE: Registered Agent signature required when reappointing)

3/30/95

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY ST ZIP
PST
KUCERA, DEAN E.
2270 PINELLAS PT DR., S
ST PETERSBURG, FL 00000

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY ST ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY ST ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY ST ZIP

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, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(9)(a), 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. 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:

Dean E. Kucera

(Signature and typed or printed name of signing officer or director)

3/30/95

813-821-4440