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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sangra, B. Mortham

Socretary of State . **DIVISION OF CORPORATIONS**

DOCUMENT # G19898

(7)

VE

Principal Place of Business

rporation Name	_	
RONICA GASS,	INC.	

•	•	1

Mailing Address



FILED

Jun 09 1997 8:00am

Secretary of State

7508 NEW JER HUDSON FL 34 US		7506 NEW JERSEY AVE. HUDSON FL 34667-3263 US									
						3. Date incorporated or Qualified 01/24/1983			3e. Date of Last Report 04/26/1996		
	Place of Business	2a. Mailing Address				4. FEI Number		1 4 11=	1	Applied For	
21		26				59-2268034				Not Applicabl	
Sulte, Apt.		Suite, Apt. #, etc.				5. Certificate of Sta	lus Desired			5 Additional Required	
Clty & Stat 23	е	City & State				Election Campal Trust Fund Contr				00 May Be	
Zip 24	Country 25	7ip	Gou 30	ntry		8. This corporation Florida Statutes			tax unde	r s. 199.032,	
	9. Name and Address of Curre	ent Registered Agent				10. Name and Addr	ess of New Reg	istered A	Agent		
WEK	SG, HEINZ R			81	Name •	Veronica Ca	ss Weis	s			
1295 HUD	97-PEBBLE: BCH-CI R. I SON FL: 3486 7			82		ress (P.O. Box Number i 12937 Pebbl					
	•			83							
			1	84	City	Hudson, FL	34667	FI		ip Code	
11. Pursuant office or r	to the provisions of Sections 607.05 egistered agent, or both, in the Stat im familiar with, and accept the obli	02 and 607.1508, Florida Statue of Florida. Such change was	utes, the at authorized	by	named corporate	poration submits this station's board of directors	ement for the pu I hereby accept	rpose of the appo	changing cintment	g its registered as registered	
	Veronic A CASS Signature, typed or printed name of registered as				/	weight (minute)	6-3-97	DATE			
12.		ND DIRECTORS	13.		····	ADDITIONS/CHAN			DIRECT	ORS IN 12	
TITLE	P	☐ DELETE	1.1 Tit	LE.					☐ Chang	e 🔲 Addition	
NAME	CASS-WEISS, VERONICA		1.2 NA	ME							
STREET ADDRESS	7506 NEW JERSEY AVE.				ADDRESS						
CITY-ST-ZIP TITLE	HUDSON FL	DELETE	1.4 CH		- ZIP					T Line	
NAME		T preced	2.1 T/I 2.2 NA					i	Chang	e L Addition	
STREET ADDRESS					ADDRESS						
CITY CT TIP			2.4 Cf				-				
TITLE		DELETE	31 111						Chang	e Addition	
NAME			3.2 NA	ME							
STREET ADDRESS			3.3 STF	REET A	ADDRESS						
CITY-ST-ZIP			3 4. 00		T-ZIP	,					
TITLE		☐ DELETE	4.1 101						Chang	e 🔲 Addition	
NAME			4. 2 NA								
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP TITLE		DELETE	4.4 CIT 5.1 TIT		- ZIP				Change	e	
NAME			5.1 TO					•	virangi	L Audition	
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP			5.4 CiT								
TITLE		☐ DELETE	61 TH					<u></u> -	Change	Addition	
NAME			6.2 NAM	ME				_	·		
STREET ADDRESS			6.3 STA	EET A	ADDRESS						
CITY-ST-ZIP			6.4.011	v c1	710						

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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.