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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 28 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

SIGNATURE;

DOCUMENT # G46085

(8)

	OUTH INCOME PROPERTIE	ES, INC.			
Principal Place	e of Business	Mailing Address		T TORKISEL BOOK BLAKE ONLIS BRIEF TUSKE USE	L BURLU MUNIY WINNI WHOLI CHANU NINII HONI
THE PARTY OF THE P	HACE STREET #500	3725 WEST GRACE STRE TAMPA 1 23807-4823	Howal Str North 33613		
59	96 W. Hwy 192 Kissiman FC 34 lace of Business	16307 1/11	was 313	2 Data lacouracted as Qualified	3a. Date of Last Report
• ,	11. SSIMAR FL. 24	74/	WALFL 3361	3. Date Incorporated or Qualified 06/23/1983	05/01/1996
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26	V	59-2733549	Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.	THE PARTY OF THE P		\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	e	City & State		6. Election Campaign Financing	<b>\$5.00</b> May Be
23 Zin	T. O. A.	28	1 0	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	_ ~
24	9. Name and Address of Curren	29 t Registered Agent	[30]	Florida Statutes  10. Name and Address of New Re	Yes No
LIVE	TOO LADOVE COOLIDE		81 Name	10, Hame and Address of Hest Ne	gretored Agent
MIERO, LAWINI E., EQUINE					
	TE 500	107 VIII MONEY	B2 Street Addre	ess (P.O. Box Number is Not Acceptab	ole)
		,	83		
TAIT	IPA FL <b>2360</b> 7 336/3	•			
			84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607 050;	2 and 607.1508, Florida Statut	tes, the above-named corpo	oration submits this statement for the o	urnana of changing its registered
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. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.					
SIGNATURE	with the transfer and the oblige	10013 01; 00011011 007;0003, 11	onda dialdies.		
SIGNATURE	Signature, typed or puried name of registered agei	nt and title if applicable (NO)	F:: Registered Agent signature require	d when reinstating)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TITLE	Р	L_I DELETE	1.1 TITLE		Change Addition
NAME	ESTES, JEVON	12-7 11'1/kum)	1.2 NAME		
STREET ADDRESS	2725 W GRACE ST, #500	COO / V/(love)	1.3 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL 33C13	Decemen	1.4 CITY - ST - ZIP		
TITLE	FOTES HOOM	☐ DELETE	2.1 TITLE		Change Addition
NAME Olecer abores	3725 W. GRACE ST. SUITE 50	~ 16287 1/0 (W	2 PRIME		
STREET ADDRESS	TAMPA FL 2007- 336/3	67	2.3 STREET ADDRESS		į
CITY-ST-ZIP TITLE	IMMEN FL #8001" 33673	DELETE	2.4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME		□ betere	3.1 THEE		Change Addition
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
City-St-Zip			4.4 CHTY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	,ı, 61 TITL€		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - ST - ZIP	and the ball the interest to a	Light Abic Education	6 4 CITY - ST - ZIP		
information	n indicated of thistannual report or su	upplementa: annual report is t	rue and accurate and that r	in Section 119.07(3)(i), Florida Statutes my signature shall have the same lega as required by Chapter 607, Florida S	l effect as if made under noth that l