COR ANNU	PROFIT RPORATION JAL REPORT <b>1997</b>		Sandra Socrei	ARTMENT OF STATE <b>B. Mortham</b> Lary of State F CORPORATIONS	May Sec	05 19 retary		
Corporation FCDA, I	n Name –	71334	(8)					
DIS-N DALE I UITE 405 AMPA FL 336			Mailing Address 1915-N DALE MABRY SUITE 405 TAMPA FL 33607-2555 US					
S			03		3. Date Incorporated or Q 11/23/1983		Date of Last Repo 01/1996	Ort
Principal Pi	lace of Business		2a. Mailing Address		4. FEI Number 59-2559799			ed For
Suite, Apt.	#, etc.		Suite, Apt. #, etc.		5. Certificate of Status Des	sired 🗍	\$8.75 Add	litional
City & State	e		City & State		6. Election Campaign Fina	incing	Fee Requi	
Zip	Coun		28 Zip	Country	Trust Fund Contribution 8. This corporation has lial		Added to F	
	25 9. Name and Add		29	30	Florida Statutes	Yes	🔲 No	
COT	IO, FRANK	less of Current Re	gistered Agent	81 Name		New Negistered	Allent	
	5-N DALE MABRY TE 405			82 Street	Address (P.O. Box Number is Not /	\cceptable)		
oui								
	IPA FL 33607			83				
	to the provisions of Se	ections 607,0502 an	d 607, 1508, Florida Stat Jarida, Such change wat	64 City	Corporation submits this statement	FL for the purpose of by accept the app	of changing its re	enistered
TAM Pursuant t office or ri agent. I an IGNATURE	to the provisions of Se egistered agent, or bo m familiar with, and a Stonauro, typed or point a na	the in the State of Fi	forida. Such change was and choice 607.0505, I inte i' applicable (No	B4 City utos, the above-named sutthorized by the cor Florida Statules, Ote Registered Agent equator	poration's board of directors. I herei	for the purpose of by accept the ap DATE	of changing its repointment as reg	egistered gisterod
TAM Pursuant f office or r agent. I a GNATURE	to the provisions of Se egistered agent, or bo m familiar with, and a signalwe, lyped or privid na	the intervention	forida. Such change was and choice 607.0505, I inte i' applicable (No	<b>84</b> City utos, the above-named sutthorized by the cor Florida Statules,	poration's board of directors. I here	for the purpose of by accept the ap DATE	D DIRECTORS I	egistered gisterod
TAM Pursuant 1 office or m agent. I ar GNATURE	to the provisions of Se egistered agent, or bo m familiar with, and a signature, lyped or prior d na PD COTO, FRANK	ND ID State of F Solution States for Me of registered agent and OFFICERS AND DI	lorida. Such change was x of Color 007 6505, I I file P applicable (NO RECTORS	B4 City     Utos, the above-namec s authorized by the cor Florida Statules.     11.     11     12.     12.	poration's board of directors. I herei	for the purpose of by accept the ap DATE	D DIRECTORS I	egistered gistered
TAN Pursuant 1 office or ri agent. I an	to the provisions of Se egistered agent, or po m familiar with, and a Signalure, lyped or privid na PD COTO, FRANK 1915-N DALE MA TAMPA FL	ND ID State of F Solution States for Me of registered agent and OFFICERS AND DI	lorida. Such change was x of Color 007 6505, I I file P applicable (NO RECTORS	B4 City     Utos, the above-namec s authorized by the cor Florida Statules.     Dit: Repistered Agent signatur     13.     1.1 IIILE	poration's board of directors. I hore	for the purpose of by accept the ap DATE	D DIRECTORS I	egistered gisterod
TAM Pursuant 1 office or m agent. 1 ar GINATURE LE ME REET ADDRESS IY- ST-ZIP LE	to the provisions of Se egistered agent, or bo m familiar with, and a Signature. typed or privid na PD COTO, FRANK 1915-N DALE MA	NU ID State of FI	lorida. Such change was x of Color 007 6505, I I file P applicable (NO RECTORS	B4 City     Utos, the above-named     s authorized by the cor     Florida Statules,     OIE Registered Agent signatur     13     1.1 TITLE     1.2 NAME     1.3 STREET ADDRESS	poration's board of directors. I hore required when reinstating) ADDITIONS/CHANGES T	tor the purpose of by accept the an DATE O OFFICERS AN	D DIRECTORS II	N 12 Addition
TAM Pursuant i office or ri agent. J ai GINATURE LE ME REET ADDRESS IY- ST-ZIP LE ME REET ADDRESS	to the provisions of Se egistered agent, or po m familiar with, and a stgnature, lyped or physic na PD COTO, FRANK 1915-N DALE MA TAMPA FL SDV COJO, BONNIE L 1811 LAUREL OA	NU ID State of FI	Lorida Such change was a of Action 007 0505, f Inte Papplicable (No RECTORS	B4         City           utos, the above-named suttorized by the cor Florida Statules.         OIL           OIL         Registered Agent signatur           13.         1.1           1.1         TLF           1.2         NAME           1.3         STREET ADDRESS           1.4         CITy - ST- ZIP           2.1         THE           2.2         NAME           2.3         STREET ADDRESS	poration's board of directors. I hore required when reinstating) ADDITIONS/CHANGES T	tor the purpose of by accept the an DATE O OFFICERS AN	D DIRECTORS II	N 12 Addition
TAM Pursuant i office or ri agent. J ai GNATURE LE ME REET ADDRESS IY- ST-ZIP LE ME REET ADDRESS IY- ST-ZIP	to the provisions of Se egistered agent, or bo m familiar with, and a stgnature, lyped or prived na PD COTO, FRANK 1915-N DALE MA TAMPA FL SDV COJO, BONNIE L	NU ID State of FI	Lorida Such change was a of Action 007 0505, f Inte Papplicable (No RECTORS	B4         City           utos, the above-named southorized by the conflorida Statules.         Other Registered Agent signature           13.         1.1 TILE           1.2 NAME         1.3 STREE1 ADDRESS           1.4 CITY - ST-ZIP         2.1 TILE           2.2 NAME         2.2 NAME	poration's board of directors. I hore	tor the purpose of by accept the an DATE O OFFICERS AN	D DIRECTORS II	egistored gisterod N 12 Addition
TAM Pursuant 1 office or n agent. I at GNATURE LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADORESS IY-ST-ZIP LE ME	to the provisions of Se egistered agent, or po m familiar with, and a stgnature, lyped or physic na PD COTO, FRANK 1915-N DALE MA TAMPA FL SDV COJO, BONNIE L 1811 LAUREL OA	NU ID State of FI	Lorida Such change was and four CO7 0505, f Inter applicable (No RECTORS	B4         City           utos, the above-named suttorized by the cor Florida Statules.         Ote           11         The Issue         Statules.           11         The Issue         Issue           13         Issue         Statules.           14         The Issue         Issue           13         Street Address         Issue           13         Street Address         Issue           14         The Issue         Issue           13         Street Address         Issue           23         Street Address         Issue           23         Street Address         Issue           31         The Issue         Ites           32         NAME         Ites	poration's board of directors. I hore required when reinstating) ADDITIONS/CHANGES T	tor the purpose of by accept the an DATE O OFFICERS AN	D DIRECTORS II	egistered gistered N 12 Addition
TAM Pursuant 1 office or n agent. 1 ar GNATURE  IE ME REET ADORESS IY- ST-ZIP IE ME REET ADORESS ME REET ADORESS	to the provisions of Se egistered agent, or po m familiar with, and a stgnature, lyped or physic na PD COTO, FRANK 1915-N DALE MA TAMPA FL SDV COJO, BONNIE L 1811 LAUREL OA	NU ID State of FI	Lorida Such change was and four COT 0505, f Iffic Papelorable (No RECTORS DELETE	B4         City           utos, the above-named suttorized by the conflored Statules.         Ote Fregistered Agent signature           13.         1.1 TITLE           1.2 NAME         1.3 STREET ADDRESS           1.4 CITY-ST-ZIP         2.1 TITLE           2.3 STREET ADDRESS         2.4 CITY-ST-ZIP           3.1 TITLE         3.2 NAME           3.3 STREET ADDRESS         2.4 CITY-ST-ZIP           3.1 TITLE         3.2 NAME           3.3 STREET ADDRESS         3.4 CITY-ST-ZIP	poration's board of directors. I hore required when reinstating) ADDITIONS/CHANGES T	tor the purpose of by accept the an DATE O OFFICERS AN	DIRECTORS II	egistored gisterod N 12 Addition
TAM Pursuant 1 office or n agent. 1 ar GINATURE  IE ME REET ADDRESS IY-ST-ZIP IE ME REET ADDRESS IY-ST-ZIP IE ME REET ADDRESS IY-ST-ZIP IE	to the provisions of Se egistered agent, or po m familiar with, and a stgnature, lyped or physic na PD COTO, FRANK 1915-N DALE MA TAMPA FL SDV COJO, BONNIE L 1811 LAUREL OA	NU ID State of FI	Lorida Such change was a of four 607 0505, f Interrapplicable (No RECTORS	B4         City           utos, the above-named suttiorized by the cor           Florida Statules.           01E         Registered Agent signature           13.           1.1 TITLE           1.2 NAME           1.3 STREET ADDRESS           1.4 CITY-ST-ZIP           2.1 TITLE           2.2 NAME           2.3 STREET ADDRESS           2.4 CITY-ST-ZIP           3.1 TITLE           3.2 NAME           3.3 STREET ADDRESS           3.4 CITY-ST-ZIP           3.1 TITLE           3.2 NAME           3.3 STREET ADDRESS           3.4 CITY-ST-ZIP           3.1 TITLE           3.2 NAME           3.3 STREET ADDRESS           3.4 CITY-ST-ZIP	poration's board of directors. I hore required when reinstating) ADDITIONS/CHANGES T	tor the purpose of by accept the an DATE O OFFICERS AN	DIRECTORS II	egistored gisterod N 12 Addition
TAM Pursuant 1 office or n agent. I ar ginature	to the provisions of Se egistered agent, or po m familiar with, and a stgnature, lyped or physic na PD COTO, FRANK 1915-N DALE MA TAMPA FL SDV COJO, BONNIE L 1811 LAUREL OA	NU ID State of FI	Lorida Such change was and four COT 0505, f Iffic Papelorable (No RECTORS DELETE	B4         City           utos, the above-named suttorized by the conflored Statules.         Ote Fregistered Agent signature           13.         1.1 TITLE           1.2 NAME         1.3 STREET ADDRESS           1.4 CITY-ST-ZIP         2.1 TITLE           2.3 STREET ADDRESS         2.4 CITY-ST-ZIP           3.1 TITLE         3.2 NAME           3.3 STREET ADDRESS         2.4 CITY-ST-ZIP           3.1 TITLE         3.2 NAME           3.3 STREET ADDRESS         3.4 CITY-ST-ZIP	poration's board of directors. I hore required when reinstating) ADDITIONS/CHANGES T	tor the purpose of by accept the an DATE O OFFICERS AN	DIRECTORS II	egistored gisterod N 12 Addition
TAM Pursuant i office or m agent. I ar GINATURE I. GINATURE I. ME REET ADDRESS IY-ST-ZIP ILE ME REET ADDRESS IY-ST-ZIP ILE ME REET ADDRESS IY-ST-ZIP ILE ME REET ADDRESS IY-ST-ZIP	to the provisions of Se egistered agent, or po m familiar with, and a stgnature, lyped or physic na PD COTO, FRANK 1915-N DALE MA TAMPA FL SDV COJO, BONNIE L 1811 LAUREL OA	NU ID State of FI	Lorida Such change was and four COT 0505, f Iffic Papelorable (No RECTORS DELETE	B4     City       utos, the above-named s authorized by the cor       Florida Statules.       OLE Repistered Agent signatur       13.       1.1 TITLE       1.2 NAME       1.3 STREE1 ADDRESS       1.4 CITY - ST- ZIP       2.1 TITLE       2.2 NAME       2.3 STREE1 ADDRESS       2.4 CITY - ST- ZIP       3.1 TITLE       3.2 NAME       3.3 STREE1 ADDRESS       3.4 CITY - ST- ZIP       3.1 TITLE       3.2 NAME       3.3 STREET ADDRESS       3.4 CITY - ST- ZIP       4.7 NAME	poration's board of directors. I hore required when reinstating) ADDITIONS/CHANGES T	tor the purpose of by accept the an DATE O OFFICERS AN	Change Change Change Change Change	egistered gisterod
TAM Pursuant 1 office or m agent. 1 ar GINATURE I. GINATURE I. ME REET ADDRESS IY-ST-ZIP ILE ME REET ADDRESS IY-ST-ZIP ILE ME REET ADDRESS IY-ST-ZIP ILE ME	to the provisions of Se egistered agent, or po m familiar with, and a stgnature, lyped or physic na PD COTO, FRANK 1915-N DALE MA TAMPA FL SDV COJO, BONNIE L 1811 LAUREL OA	NU ID State of FI	Inite Papphentie (NG RECTORS	B4     City       utos, the above-named s authorized by the cor       Florida Statules,       01E       Repistered Agent signatur       13       1.1 TITLE       1.2 NAME       1.3 STREE1 ADDRESS       1.4 CITY - ST- ZIP       2.1 TITLE       2.2 NAME       2.3 STREE1 ADDRESS       2.4 CITY - ST- ZIP       3.1 TITLE       3.2 NAME       3.3 STREE1 ADDRESS       3.4 CITY - ST- ZIP       4.7 NAME       4.8 STREE1 ADDRESS       4.4 STREE1 ADDRESS       4.4 STREE1 ADDRESS	poration's board of directors. I hore required when reinstating) ADDITIONS/CHANGES T	tor the purpose of by accept the an DATE O OFFICERS AN		egistered jisterod N 12 Addition
TAM	to the provisions of Se egistered agent, or po m familiar with, and a stgnature, lyped or physic na PD COTO, FRANK 1915-N DALE MA TAMPA FL SDV COJO, BONNIE L 1811 LAUREL OA	NU ID State of FI	Inite Papphentie (NG RECTORS	B4         City           utos, the above-named sauthorized by the cor           Florida Statules.           01E         Registered Agent signatur           13.           1.1 TITLE           1.2 NAME           1.3 STREET ADDRESS           1.4 CITY - ST - ZIP           2.1 TITLE           2.2 NAME           2.3 STREET ADDRESS           2.4 CITY - ST - ZIP           3.1 TITLE           3.2 NAME           3.3 STREET ADDRESS           3.4 CITY - ST - ZIP           4.1 TITLE           3.2 NAME           3.3 STREET ADDRESS           3.4 CITY - ST - ZIP           4.1 TITLE           4.2 NAME           4.3 STREET ADDRESS           4.4 CITY - ST - ZIP           5.1 TITLE           5.2 NAME           5.3 STREET ADDRESS	poration's board of directors. I hore required when reinstating) ADDITIONS/CHANGES T	tor the purpose of by accept the an DATE O OFFICERS AN		egistered jisterod N 12 Addition
TAM	to the provisions of Se egistered agent, or po m familiar with, and a stgnature, lyped or physic na PD COTO, FRANK 1915-N DALE MA TAMPA FL SDV COJO, BONNIE L 1811 LAUREL OA	NU ID State of FI	Inite Papphentie (NG RECTORS	B4     City       utos, the above-named sauthorized by the cor       Florida Statules.       01E     Registered Agent signatur       13.       1.1 TITLE       1.2 NAME       1.3 STREET ADDRESS       1.4 CITY-ST-ZIP       2.1 TITLE       2.2 NAME       2.3 STREET ADDRESS       2.4 CITY-ST-ZIP       3.1 TITLE       3.2 NAME       3.3 STREET ADDRESS       3.4 CITY-ST-ZIP       4.7 NAME       4.3 STREET ADDRESS       4.4 CITY-ST-ZIP       5.7 TITLE       5.3 STREET ADDRESS       5.3 STREET ADDRESS       5.4 CITY-ST-ZIP       5.7 TITLE       5.8 STREET ADDRESS       5.4 CITY-ST-ZIP       6.1 TITLE	poration's board of directors. I hore required when reinstating) ADDITIONS/CHANGES T	tor the purpose of by accept the an DATE O OFFICERS AN	Change	egistered jisterod N 12 Addition
TAM	to the provisions of Se egistered agent, or po m familiar with, and a stgnature, lyped or physic na PD COTO, FRANK 1915-N DALE MA TAMPA FL SDV COJO, BONNIE L 1811 LAUREL OA	NU ID State of FI	Inite Pappleable (No RECTORS	B4         City           utos, the above-named sauthorized by the cor           Florida Statules,           01E         Registered Agent signatur           13.           1.1 TITLE           1.2 NAME           1.3 STREET ADDRESS           1.4 CITY - ST-ZIP           2.1 TITLE           2.2 NAME           2.3 STREET ADDRESS           3.4 CITY - ST-ZIP           3.1 TITLE           3.2 NAME           3.3 STREET ADDRESS           3.4 CITY - ST-ZIP           4.4 CITY - ST-ZIP           4.7 NAME           4.3 STREET ADDRESS           4.4 CITY - ST-ZIP           5.7 TITLE           5.2 NAME           5.3 STREET ADDRESS           4.4 CITY - ST-ZIP           5.7 TITLE           5.3 STREET ADDRESS           5.4 CITY - ST-ZIP	poration's board of directors. I hore required when reinstating) ADDITIONS/CHANGES T	tor the purpose of by accept the an DATE O OFFICERS AN	Change	egistored jisterod N 12 Addition Addition