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



## Sandra B. Mortham

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COF ANNU	Profit RPORATION JAL REPORT <b>1997</b>		FLORIDA DEPAF <b>Sandra E</b> Secreta DIVISION OF (	. Morth ry of State	am e			Apr 09 1997 8:00am Secretary of State				
DOCUI 1. Corporatio	MENT # H		(1)									
Principal Plac P. O. BOX 1451 1940 SEVENTH ST. PETERSBUI	3 AVES.	P. 19	Mailing Address P. O. BOX 14513 1940 SEVENTH AVES. ST. PETERSBURG FL 33733-4513									
				, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,		717	3. Date Incorporated or O 05/29/1984	ualified		te of Last Ri 1/1996		
2. Principal P	lace of Business	2a 26	Mailing Address				4. FEI Number 59-2431147			<b>├</b> ─┿┈∸	plied For t Applicable	
Suite Apt.	# etc.	27	Suite, Apt. #, etc.				Certificate of Status Des	sired		\$8.75 A	Additional	
City & Stat	0	28	City & State				6. Election Campaign Fina Trust Fund Contribution	ncing		\$5.00 Added t		
Zip <b>24</b>	Zip Country Zip 25 29			Country 30			This corporation has lial     Florida Statutes		Yes [	] No	199.032,	
		iress of Current Regis	tered Agent		81	Name	10. Name and Address of	New Re	gistered /	lgent		
	AL, ROBERT LEE											
1940 7TH AVE., SOUTH ST. PETERSBURG FL 33712					82	Street Ac	dress (P.O. Box Number is Not A	cceptab	le)			
01.1		•, •			83							
					84	City				85 Zip (	Code	
41 Durawasi	to the serverions of C	notions 607 0502 and 6	07 1609 Florida Statul	or the a		named o	ornoration culpmite this statement	for the n	FL	1 1	ì	
office or r	registered agent, or b	oth, in the State of Flori ecopt the obligations o	da Such change was I. Section 607 0605. FI	es, ine ai authorize wida Stal	d by	the corpo	orporation submits this statement ration's board of directors. I here	by accer	the app	ointment as	registered	
SIGNATURE	arria inila: With and c	coopt the obligations o	, Georgia (6) .6566, 4 i	orida otal	.0103	•						
	Signaline Typed or printed o	ame of registered agent and tile			d Age	nt signature re	quired when reinstating)		DATE			
12.	PD	OFFICERS AND DIRE	CTORS DELETE	13. 1.1 TI	T) E		ADDITIONS/CHANGES T	O OFFIC	EHS AND	Change	S IN 12 Addition	
TITLE	CREAL, ROBERT	IFF	LJ DELETE	1.1 N		1				Change		
STREET ADDRESS	1940 7TH AVE., \$			1		ADDRESS						
CITY-ST-ZIP	ST. PETERSBURG					T-ZIP						
TITLE	0		DELETE	2.1 TI	TLE		· · · · · · · · · · · · · · · · · · ·			Change	Addition	
NAME	CREAL, ROBERT			2.2 N	AME	- 1						
STREET ADDRESS	2140 26TH STRE					ADDRESS		7				
CITY - ST - ZIP	ST. PETERSBURG	i tL	☐ DELETE			T-ZIP				Change	☐ Addition	
TITLE			□ beceie	31T)		-				☐ CHARIDE	M ADOMOST	
NAME STREET ADDRESS	ļ			3.2 N		ADDRESS					ļ	
CITY-ST ZIP				ŀ		ST - ZIP						
TITLE			DELETE	4.1 Ti		····				Change	Addition	
NAME				4.21	IAME	\						
STREET ADDRESS				435	TREET	ADDRESS					ļ	
CITY-S1-7i2			··-			T-ZIP				<del></del>		
TITLE	ļ		☐ DELETE	5.1 1						Change	Addition	
NAME				5.2 N		100000					ļ	
STREET ADDRESS				10		ADDRESS   T-ZIP					ļ	
City-St-ZiP	i			240	111-9	1~215						

6.4 CITY - ST- ZIP 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 oath; 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. appears in Block 12 or Blook

6.3 STREET ADDRESS

6.1 TITLE 62 NAME

SIGNATURE:

TITLE

NAME

STREET ADDRESS

DELETE

H-4-97 (813)896-2602 179748

☐ Change ☐ Addition

**FILED**