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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

1996		DIVISION OF CORPORATIONS								
DOCUN 1. Corporation	MENT #	H25006	(8)		· .					
GUARNIERI & MARTINEZ, P.A.										
Principal Place of Business 608 E. MORGAN ST BRANDON FL 33510			Mailing Address 608 E. MORGAN ST BRANDON FL 33510							
							3. Date incorporated or Qualified 10/11/1984		of Last R	
2. Principal Pla	nce of Business		2a. Mailing Address				4. FEI Number 59-2456679	l <b>Y</b>		Applied For Not Applicable
Suite, Apt. #	⊭, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75	Additional Required
City & State	;		City & State				Election Campaign Financing     Trust Fund Contribution		\$5.0	0 May Be d to Fees
Zip <b>24</b>	25	Dountry	Zıp 29	Country 30			8. This corporation has liability for Florida Statutes	intangible ta		
		Address of Current R		·	 		10. Name and Address of New I	Registered	Agent	
OI LA DANI	FD: 1414F0 W			81	Name					
	eri, James W. Morgan St			82	Street A	Address	.(P.O. Box Number is Not Accepta	ble)		
	ON FL 33511			83						
				84	City			FI	85 Z	p Code
11. Pursuant t	a the provisions o	Sections 607.0502 and	d 607.1508, Florida Statutes	s, the above r	named co	orporatio	on submits this statement for the pu		anging its i	egistered office
SIGNATURE ,		ed name of registered agrint and	tice Lapplicable (NCR)	E. Rogisheod Agen				rpose of chapointment as		
SIGNATURE			tice Lapplicable (NCR)					rpose of characteristics  (DAT:  ICERS AND		
SIGNATURE .  12.  TITLE  NAME  STREET ADDRESS	DP GUARNIERI, 608 E. MOR	of name of registered agent and OFFICERS AND D JAMES W. GAN ST	tro Lappicatel (NSB IRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET	it sejnature ra	DS Ner:	ADDITIONS/CHANGES TO OFF  L. Martinez  East Morgan Stree	rpose of characteristics of the contracter of th	DIRECTO	DRS IN 12
SIGNATURE ,  12.  TILE  NAME	Signature, typed or printe  DP  GUARNIERI,	of name of registered agent and OFFICERS AND D JAMES W. GAN ST	tro Lappicatel (NSB IRECTORS	E Registered Agen 13. 1.1 TiTLE 1.2 NAME	it sejnature ra	DS Ner:	ADDITIONS/CHANGES TO OF	rpose of chapital from the control of the control o	DIRECTO	DRS IN 12
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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 of 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 a attachment with an address.

SIGNATURE:

James Guarnieri

Signature shall have the same legal effect as if made under oath in the corporation of th