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

PROFIT CORPORATION ANNUAL REPORT

DITY-ST-ZiP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 16 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

1997				DIVISION OF CORPORATIONS					~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ 	- J		
DOCU	MENT #	# H7319	32	(7)								
l			<i></i>	(1)								
GEORG	BE J. SANK	EH, PA								Bigin grani		Bibli (BB)
<u> </u>												
Principal Plac	e of Business	·	Ma	iling Address			4			DIĞH GIBLI	OFFIN FIBIL BLOW	
2424 W. TAMPA BAY BLVD.				2424 W. TAMPA BAY BLVD.								
NO. 109-A TAMPA FL 33607				NO. 109-A TAMPA FL 33607-1323								
IAMPA FL 33	6U/		170	MFM FC 00007-1020				3.	Date Incorporated or Qualified	3a. Di	ate of Last Re	eport
									08/27/1985	04/	/17/1996	==,_,,,
2. Principal Place of Business				2a. Malting Address				4.	FEI Number		}	plied For
Suite, Apt. #, etc				Suite, Apt. #, etc.					59-2559193		\$8.75	t Applicable
22				27				5.	Certificate of Status Desired		Fee Re	
City & State				City & State				6.	Election Campaign Financing		\$5.00	May Be
23			28		·				Trust Fund Contribution		Added t	
Zip		Country		Zip	Cou	ntry		₿.	This corporation has liability for in			199.032,
24	D. Namo a	5 nd Address of Cur	29	arad Anant	30			10	Florida Statutes Name and Address of New Reg		No Agent	
041	NKER, GEOR		Tent Hogist	ered Agent		81	Name	10.	Hallie allo Modress ol Hen He	Jistered :	Agent	
						82	Carrent Andre	/5	O. Box Number is Not Acceptab			
2424 W. TAMPA BAY BLVD. NO. 109-A						04	Street Addi	ress (r	2.O. Box Number is Not Acceptab	ie)		
TAMPA FL 33607					63							
,						84	City				85 Zip (Code
							•			FL	• · ·	
11. Pursuant office or i	to the provisio registered agei	ns of Sections 607.0 nt, or both, in the Si	0502 and 60 late of Florid	i7.1508, Florida Stat a. Such change was	utes, the at authorized	bove d by	a-named corp ≀ the corporat	poratio tion's l	on submits this statement for the p board of directors. I hereby accep	urpose of t the app	of changing its pointment as	s registered registered
agent. La	am familiar with	, and accept the of	oligations of.	Section 607.0505, I	Florida Stat	utes	3.					i
SIGNATURE	Stigrature, Typed or	printed name of registered	i agent and title it	applicable. (N	OYE- Registered	i Age	ant signature requi	red wher	n reinstating)	DATE		
12.			AND DIREC	TORS	13.				ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	S IN 12
TIBLE	PD			☐ DELETE	1.9 (1)	TL.E					Change	Addition
NAME		GEORGE J.			1.2 N							
STREET ADDRESS		'AMPA BAY BLVD	J.				ADDRESS					
City - S1 - ZiP	TAMPA FL			DELETE	1.4 CI 2.1 Ti		I-ZIP				Change	Addition
NAME	, •	MARJORIE		L Detect	2.2 N/		1				- Citarillo	
STREET ADDRESS		MPA BAY BLVD					ADDRESS					
CITY-ST-ZIP	TAMPA FL				1		ST-ZIP					
TITLE				DELETE	3.1 T	TLE					Change	Addition
NAME					3.2 N	AME						
STREET ADDRESS					3.3 \$1	PEET	ADDRESS					
City-SI-76				Flactric			ST-ZIP				Change	Addition
THE				DELETE	4.1 TI		· 1				Change	L ADGIIIOII
NAME PROFES AGOREGE					4.2 N		ADDRESS					
STREET ADDRESS CITY - ST - ZIP							T-ZIP					
THILE	J			DELETE	5.1 TI		n all				Change	Addition
NAME				•	5.2 N/		ĺ				-	
STHEET ADDRESS					5.3 \$1	REET	ADDRESS					
CITY-ST-ZIP					5.4 CI	TY-S	IT-ZIP					
TITLE				DELETE	6.1 TI	TLE					Change	Addition
NAME					6.2 N	ME						
					= c > 01		ABBBERGO I					

14. I do heroby 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.

SIGNATURE:

64 CITY - ST-ZIP