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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

**DOCUMENT # J51792** 

25

FELDMAN, MARVIN J. 2161 LOGAN ST (6)

Mailing Address

2161 LOGAN ST

2a. Maling Address

City & State

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Suite, Apt. #, etc

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9. Name and Address of Current Registered Agent

% MARVIN J. FELDMAN

**CLEARWATER FL 34625-1312** 

ONICON INCORPORATED

Principal Prace of Business

**CLEARWATER FL 34625-1312** 

2. Principal Place of Business

Suite, Apt. #, etc.

City & Starc

% MARVIN J. FELDMAN

2161 LOGAN ST

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22

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FILED				
Mar 24 1997 8:00am				
Secretary of State				

	Date Incorporated or Qualified 01/14/1987		Date of Last Report
4.	FEI Number 59-2769898	•	Applied For Not Applicable
5.	Certificate of Status Desired	S8.75 Additional Fee Required	
6	Election Campaign Financing		\$5 00 May Bo

Yes No

8. This corporation has liability for intangible tax under s. 199.032,

10. Name and Address of New Registered Agent

Added to Fees

Trust Fund Contribution

Florida Statutes

Street Address (P.O. Box Number is Not Acceptable)

CLEARWATER FL 33515

83

84 City

FL 85 Zip Code

11. Pursuant to the previsions 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

Country

81

82

Name

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SIGNATURE Signature types or once discuss of exposured against another of applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)13. □ DELETE Change 100 1.1 1/11.8 Addition FELDMAN, MARVIN J. 1.2 NAME NAME 2161 LOGAN ST STREET ADDRESS 1.3 STREET ADDRESS **CLEARWATER FL** City - St - ZiP 1.4 CITY - ST - ZIP THEF DEL ETE Change Addition 2.1 TITLE DAVIS. ADRIENNE L NAME 2.2 NAME 3376 BRAIN ROAD, SO. STREET ADDRESS 2.3 STREET ADDRESS PALM HARBOR FL CITY - ST - Z(P 2. 4 CITY-ST-ZIP DELETE  $\mathsf{fil}_{\mathbb{T}}\mathsf{f}$ Change Addition 3.1 TOTLE FELDMAN, LINDA NAM? **3.2 NAME** 2161 LOGAN ST. STREET ADDRESS 3.3 STREET ADDRESS CLEARWATER FL CHY-SI-7/P 3.4 CHY-ST-ZIP DELETE Chanoe Addition THUE 4.1 TITLE NAM\* 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CHY SEZIP 4.4 CITY - ST - ZIP DELETE TIFLE 5.1 THE Change Addition NAM<sup>2</sup> 5.2 NAME STREET ADDR-65 5.3 STREET ADDRESS COTY - \$1, 20P 5.4 CITY - ST - ZIP MLE DELETE Change Addition 61 THUE NAM: 62 NAME STREET ADDRESS **6.3 STREET ADDRESS** 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)(1). 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:

Le Feldman LINDA FELDMAN

3-19-97 (813)447-6140