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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Saridra B. Mortham Secretary of State

1006

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DOCUN 1. Corporation	MENT #	J66402	(5)		•						
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Principal Place	of Business		Mailing Address			I	ISBUSIN DIŞA SINDE BINDE SIŞDI ÇƏNI	B AIBH BÌBH BÀBH		DIQII DIBII IBU	
% RICHARD A. ZACUR % RICHARD A. ZACUR											
5200 CENTRAL AVENUE 5200 CENTRAL AVENUE											
ST PETERSBURG FL 33707-1834 ST I			ST PETERSBURG FL 337	PETERSBURG FL 33707-1834			Incorporated or Qualified	d 3a. Date of Last Report			
							/03/1987		/20/199		
2. Pripe yat Pla	apport Business	10 4/ 2	a. Mailing Address			4. FEIN				Applied For	
21 (22)	4 US HU	V 19/16.20				5	9-2794940		⊢	Not Applicable	
\$2.e, Apt.	etc. 241/		Suite, Apt. #, etc			5 Certi	ficate of Status Desired		\$8.75	Additional	
²² UU17	e Jai	27	I			J. Och	nedic or Otalus Dealled		Fee	Required	
CA & State	· La	$\sim L/$	Orty & State				ion Campaign Financing		\$5.0	0 May Be	
23 CAPO	u wases	128					Fund Contribution			d to Fees	
24 34/	24 25	IISA 25	<i>Z</i> ip []	Count 30	ry	l l	corporation has liability for Ia Statutes	intangible ta I No	k under s	199.032,	
		Idress of Current Reg		301			e and Address of New I		Ageni	~ ~	
				8	1 Name						
ZACUR,	RICHARD A.				2 Street A		x Number is Not Acceptat	-1-1			
5200 CENTRAL AVENUE				ľ	Street	Address (F.C. Bc	x number is not acceptat	ure)			
ST PETE	rsburg fl			8	3						
				8	4 City	T-F-1			les 7.	p Code	
			77.74.74.74	1	1 1			FL			
11. Pursuant to or registere	o the provisions of S ed agent, or both, in	ections 607.0502 and 6 the State of Florida. Su	807.1508, Florida Statutes ch change was authorized	, the above I by the co	named con	rporation submit	s this statement for the pu s. I hereby accept the app	rpose of cha	nging its r	egistered office	
familiar with	h, and accept the ot	oligations of, Section 60	7.0505, Florida Statutes.	,			o Thoretay descept the upp	O TRITIC R d3	egisiered	ngent. rain	
SIGNATURE:	Spicature, typed or printed in	ame of registered agest a state	dan miss. duniti		data at la	Spured when renistaring		DA't		· · · · · · · · · · · · · · · · ·	
12.		OFFICERS AND DIRE		13.	r i signati e to		TIONS/CHANGES TO OFF		DIBECTO	RS IN 12	
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CITY-SI-ZIF					E: ADDRESS		•				
	certify that the infor	mation supplied with to	e flino is voluntarily furnish	64 CITY	51-2P	it for the exercis	tion stated in Continue 110	67/00/1 51-1			

I do hereby certify that the information supplied with this fling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(5)(k), 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.

GNATURE:

SIGNATURE MAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: _