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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J86894

(9)

TAYLOR BAIT SUPPLY, INC.

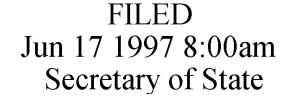
NC.

Principal Place of Business

Mailing Address

8210 TAFT STREET PEMBROKE PINES FL 33024

8210 TAFT STREET PEMBROKE PINES FL 33024-4936





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2. Principal Place of Business 2. Mailing Address 2. Mailing Address 2. Mailing Address 3. Mailing Address 4. FEI Number 65-0004829 Not Applied 5. Certificate of Status Desired Fee Requision Fee Re	pplicable ditional dired ay Be ees
21 26 65-0004829 Not A Sulte, Apt. #, etc. Sulte, Apt. #, etc. 22 5. Certificate of Status Pesired Fee Required City & State 6. Election Campaign Financing Trust Fund Contribution Added to I Zip Country 7 Country 8. This corporation has fiability for intangible tax under s. 19 24 25 29 30 Florida Statutes Yos No 9. Name and Address of Current Registered Agent TAYLOR, JERRY 62 10 TAFT STREET PEMBROKE PINES FL 33024	pplicable ditional dired ay Be ees
Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Country Country State Coun	ditional Ired ay Be ees
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Trust Fund Contribution Added to I Zip Country Added to I Added to I Country 8. This corporation has liability for intangible tax under s. 19 Florida Statutes Yes No 9, Name and Address of Current Registered Agent TAYLOR, JERRY 6210 TAFT STREET PEMBROKE PINES FL 33024 Trust Fund Contribution Added to I Added to I Added to I No 10, Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable)	ees
24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent TAYLOR, JERRY 6210 TAFT STREET PEMBROKE PINES FL 33024 81 Name 82 Street Address (P.O. Box Number is Not Acceptable)	
24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent TAYLOR, JERRY 6210 TAFT STREET PEMBROKE PINES FL 33024 81 Name 82 Street Address (P.O. Box Number is Not Acceptable)	<u></u>
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name and Address of New Registered Agent 12. Name 13. Name 14. Name 15. Name 16. Name 16. Name 17. Name and Address of New Registered Agent 18. Name 18. Name 18. Street Address (P.O. Box Number is Not Acceptable)	
TAYLOR, JERRY 6210 TAFT STREET 6210 TAFT STREET 62 Street Address (P.O. Box Number is Not Acceptable) 63 Street Address (P.O. Box Number is Not Acceptable)	
8210 TAFT STREET 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable)	
PEMBROKE PINES FL 33024	
84 City FL 85 Zip Co	ot.
	egistered
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutos, the above-named corporation submits this statement for the purpose of changing its notifice or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or laministry with, and accept the obligations of, Section 607.0505, Florida Statutos.	jistered
SIGNATURE Signature, typed or printed name of registered agent and lifle if applicable (NOTE: Registered Agent signature required when reinstating) DATE	
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	N 12
	Addition
NAME TAYLOR, JERRY 1.2 NAME	
STREET ADDRESS 8210 TAFT STREET 1.3 STREET ADDRESS	
VOITY-ST-ZIP PEMBROKE PINES FL 14 CITY-ST-ZIP	
	Addition
ANAME TAYLOR, ORESA 22 NAME	
STREET ADDRESS 8210 TAFT STREET 2.3.STREET ADDRESS	
CITY-ST-ZIP PEMBROKE PINES FL 2.4 CITY-ST-ZIP	
THELE DELETE 3.1 TITLE Change	Addition
NAME 32 NAME	
STREET ADDRESS 33 STREET ADDRESS	
34. CNY-S1-ZIP	
	Addition
NAME 4.2 NAME	
STREET ADDRESS 4.3 STREET ADDRESS	
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CITY-ST-ZIP 4.4 CITY-S1-ZIP	
	Addilion
	Addilion
TITULE DELETE 5.1 INCE Change	Addilion
TITLE DELETE 5.1 TITLE Change INAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS	Addilion
TITLE	Addition
TITLE	
TITLE	

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 armual report is true and accurate and that my signature shall have the same legal effect as if made under eath, that I am an officer or director of the corporation in 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 changes, or on an attachment with an address.