FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State 📉

DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name J95399

(8)

MR. S	OUVLAKI, INC.								
Principal Place	of Business	Mailing Address						, • • • • •	
510 DODECANESE BLVD TARPON SPRINGS FL 34689 510 DODECANESE BLVD TARPON SPRINGS FL 34689									
						3. Date Incorporated or Qualified 10/02/1987		e of Last Rep 3/31/199	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number Applied For			<u> </u>	
21		26						lot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc. 27			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State	e	City & State			6. Election Campaign Financing			May Be	
23		Zio Country			Trust Fund Contribution			to Fees	
Zip	Country	Zip	├─┐ ' ├─┐			8. This corporation has liability for intangible tax under s 199.032, Fiorida Statutes			199.032,
24	9. Name and Address of Curr	29 30		<u>-</u>		10. Name and Address of New Registered Agent			
	g. Name and Address of Con	Tent negistered Agent		81	Name	10.			
A4144 P	WAA GUADIEG A					The state of the s	-1-1		
	IKOS, CHARLES A		82 Street A			dress (P.O. Box Number is Not Acceptal	oie)		
	IESTNUT ST			83					
CLEAR	WATER FL 34616								
				84	City		FL	_ 85 Zip	Code
familiar w SIGNATURE	ith, and accept the obligations of, S Signature, typed or printed name of registered e	gent and title if applicable	(NOTE: Registered			oration submits this statement for the pupard of directors. I hereby accept the applied when remarking in ADDITIONS/CHANGES TO OF	DV.11:		
12.		AND DIRECTORS DELETE	13.	TILE		ADDITIONS/CHANGES TO OF	ICLI IS AIR	Change	Addition
TITLE	PSTD			1. 1 TITLE 1.2 NAME					
NAME	TSETSENIS, GEORGE 1215 FUCHSIA DRIVE		l	1.3 STREET ADDRESS					
STREET ADDRESS	HOLIDAY FL								
CITY-ST-ZIP TITLE	HOUDALTE	DELETE	2.11					Change	☐ Addition
NAME			22 N		1				
STREET ADDRESS	\				I ADDRESS				
CITY-ST-ZIP					ST-ZIP				
TITLE		DELFTE						Change	Addition
NAME			3.2 N	IAME					
STREET ADDRESS			3 3 3	STREE	ET ADDRESS				
CITY-ST-ZIP			3.4 0	ity-	ST-7IP			F3.0/	
TITLE		☐ DELETE	4.1	TITLE				☐ Change	■ Addition
NAME			421	IAME					
STREET ADDRESS			4.3 9	TREF	RESERVED T				
CITY-ST-ZIP					\$1 - ZIP			[] Change	Addition
TITLE		DELETE		TITLE	1			L) Grange	L1 Manual
NAME				AME					
STREET ADDRESS					1 ADDRESS		roc	29	
CITY-ST-ZIP				5 4 C+TY-ST-Z+P 6 1 TITLE		900017 -03/21/9601		MATRICAL PROPERTY OF THE PROPE	Addition
TITLE		☐ DELETE				-03\SI\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	nana	ه استان المحاول المحاول	٠.،٠٠٠
NAME				NAME		***200.00			
STREET ADDRESS	5				ET ADDRESS				
CITY-ST-ZIP			6.41		ST-ZIP	fy for the exemption stated in Section 11	9.07(3)/2/	Iorida Statu	tes I further

14. I do hereby certify that the information supplied with this filing is voluntarily turnished and does not qualify for the exemption stated in Section 119.07(3)(4), 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:

GEORGE TSETSENIS /3-/2-96 (813)937-2795