FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAR 23 AM 10:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K02305 (6)

1. Corporation Name
VENTURE 7 CORPORATION

Principal Place of Business	Mailing Address
~~115-112TH AVE N.~~ ~~STE. #410~~ ~~ST. PETERBURG FL 33716~~ US	~~115-112TH AVE N.~~ ~~STE. #410~~ ~~ST. PETERBURG FL 33716~~ US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 11/17/1987
3a. Date of Last Report: 05/13/1994
4. FEI Number: 65-0015773 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.: 1074 HYACINTH PL	26 Suite, Apt. #, etc.: 4851 WINDMILL PALM TERR NE
22	27
23 City & State: WELLINGTON, FL	28 City & State: ST PETERSBURG, FL
24 Zip: 33414 25 Country: USA	29 Zip: 33703 30 Country: USA

9. Name and Address of Current Registered Agent

LOMAGNO, VIRGINIA M.
~~115-112TH AVE. N~~
~~APT #410~~
~~ST. PETE FL 33410~~

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 4851 WINDMILL PALM TERR. NE
83
84 City: ST PETERSBURG FL 85 Zip Code: 33703

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

SIGNATURE: Virginia Lomagno — VIRGINIA LOMAGNO, PRESIDENT — 3/20/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE		☒ Change ☐ Addition
NAME	ERICKSON, JOHN F.	1.2 NAME		
STREET ADDRESS	~~1250 S WASHINGTON ST 506~~	1.3 STREET ADDRESS	437 NEW JERSEY AVE S.E.	
CITY-ST-ZIP	~~ALEXANDRIA VA~~	1.4 CITY-ST-ZIP	WASHINGTON, D.C. 20003	
TITLE	P	2.1 TITLE		☒ Change ☐ Addition
NAME	LOMAGNO, VIRGINIA M	2.2 NAME		
STREET ADDRESS	~~115-112TH AVE. N. #410~~	2.3 STREET ADDRESS	4851 WINDMILL PALM TERR NE.	
CITY-ST-ZIP	~~ST. PETE FL 33716~~	2.4 CITY-ST-ZIP	ST. PETERSBURG, FL 33703	
TITLE	~~DSF~~	3.1 TITLE	DIRECTOR	☒ Change ☐ Addition
NAME	FINOCCHIETTI, FRANCES	3.2 NAME		
STREET ADDRESS	13838 ELDER COURT	3.3 STREET ADDRESS		
CITY-ST-ZIP	W. PALM BEACH FL	3.4 CITY-ST-ZIP		
TITLE	~~D~~	4.1 TITLE	D, S, T,	☒ Change ☐ Addition
NAME	HARRIS, SARA AND SHERW	4.2 NAME	SHERWIN HARRIS	
STREET ADDRESS	13538 NORTHUMBERLAND	4.3 STREET ADDRESS		
CITY-ST-ZIP	W. PALM BEACH FL	4.4 CITY-ST-ZIP		
TITLE	D	5.1 TITLE		☐ Change ☐ Addition
NAME	ROSSI, PHILIP AND MAR	5.2 NAME		
STREET ADDRESS	14480 HALTER RD.	5.3 STREET ADDRESS		
CITY-ST-ZIP	W. PALM BEACH FL 33414	5.4 CITY-ST-ZIP		
TITLE	D	6.1 TITLE		☐ Change ☐ Addition
NAME	LARKIN, ELIZABETH	6.2 NAME		
STREET ADDRESS	7600 RIDGE RD APT. 101C	6.3 STREET ADDRESS		
CITY-ST-ZIP	SEMINOLE FL	6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Virginia Lomagno — VIRGINIA LOMAGNO, PRES — 3/20/95 — (813) 822-9111
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0311760 CP