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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 1.09858

The English Company, Inc.

						<u> </u>		ARIA BIBILI	
Principal Place of Business Malling Address					, 1 144 1114 6 684 110	11 10410 40141 ANIME	1811 91917 91811 9	1911 91911 91	1811 1881
1916 Repulica de Cuba P.O. Box 3012									
Suite F-205 Tampa, F			501-301	.2				**	
Tampa, FL 33605					3. Date incorpor	rated or Qualified	.3a. Dale	of Last Re	aport
_					8/16/8	9 .	4/0	2/96	
2. Principal Place of Business		2a. Mailing Address			4. FEI Number			* Ap	plied For
1517 E. 7th Avenue		26			59-2963617 Not Applicable				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of	Status Desired		88.75 A Fee Re	Additional
22 Suite C City & State		City & State			# Floation Com	nales Financiae			
23 Tampa, FL 33605		28			6. Election Cam Trust Fund Co			\$5.00 Added in	
Zip	Country	Zip	Countr	У		ion has liability for I			(
24			30				Yes 🛄 N	S □ No	
	9. Name and Address of Current	Registered Agent			10. Name and A	ddress of New Re	glatered Age	nt	
	•		61	Name					
Michael M. English				Street Ad	dress (P.O. Box Numb	er is Not Acceptab	le)		
1517 E. 7th Avenue, Suite C						· · · · · · · · · · · · · · · · · · ·			
Tampa, FL 33605			8	3					
			8	City			FL	35 Zip (Code
11. Pursuant	to the provisions of Sections 607 0502	and 607 1508. Florida Statu	tes the shor	ve-nemed co	rooration submits this	statement for the r		anging ft	s registered
office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State of am familiar with, and accept the obligat	Florida, Such change was	authorized t	y the corpor	ration's board of direct	ors. I hereby accer	the appoin	ment as	registered
	im tamilist with, and accept the colliga-	ilons of, Section 607.0005, Fi	iotios statut	75.					
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable. (NO	TE: Registered A	gent signature rec	quired when reinstating)		DATE		
12.	OFFICERS AND		13.		ADDITIONS/C	HANGES TO OFFIC			
TITLE	DP	☐ DELETE	1.1 TATLE	- 1			L	Change	Addition
NAME	English, Michael M		1.2 NAM		•	•			
STREET ADDRESS	1517 E. 7th Avenue	, Suite C	1	et adoress	•				
CITY-ST-ZIP	Tampa, FL 33605	7 hrunn	1.4 CiTY					C 65	Addision
TITLE	DVP	☐ DELETE	2.5 TITLE				L	Change	Addition
NAME	English, Jane		2.2 NAMI						
STREET ADDRESS	1517 E. 7th Avenue	, Suite C		ET ADDRESS					
CITY-ST-ZIP	Tampa, FL 33605	☐ DELETE	2. 4 C/TY 3.1 T/TLE					Change	Addition
TITLE		☐ DECEIE	3.1 19146 3.2 NAMI	1			L.,	CHAILDS	ייין אוניוויטטא
NAME STREET ADDRESS	1			ET ADORESS	•				l
CITY-ST-ZIP			3.4. CITY 4.1 TITLE					Change	Addition
RAME	·	" " " " " " " " " " " " " " " " " " "	4, 2 NAM				, 	,	
STREET ADDRESS		*		ET ADDRESS					
CITY-ST-ZIP			4.4 CITY-				:		
TITLE		☐ DELETE	5.1 TITLE			***		Change	Addition
1	1 .			. 1					-

14. I do hereby certify that the information supplied with this filling 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 cath; 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 changes, or an an attachment with an address.

5.2 NAME **5.3 STREET ADDRESS**

6.1 TITLE

6.2 NAME

5.4 CITY-ST-2NP

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

DELETÉ

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FILED

May 06 1997 8:00am

Secretary of State

Change