FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L27633

(1)

PENGUIN OF TAMPA BAY, INC.

FILED

May 02 1997 8:00am

Secretary of State

Principal Place of Business S.E. JACKSON BOGGS SOI E KENNEDY BLVD #1700 TAMPA FL 33802		Mailing Address						
		% E. JACKSON BOGGS 501 E KENNEDY BLVD #1700 TAMPA FL 33602-4988						
	·				3. Date incorporated or Qualified 11/02/1989	3a. Date of t 05/01/19		
	ace of Business	2a. Mailing Address			4. FEI Number		Applied Fo	\neg
21		26			59-2985074		Not Applic	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired		. 75 Addition: ee Required	al
City & State		City & State		6. Election Campaign Financing		\$5.00 May Be		
23		28		Trust Fund Contribution	Added to Fees			
Zip	Country	Zip	Count	у У	8. This corporation has liability for in	ntangible tax ur	der s. 199.03	12,
24	25		30		<u> </u>	Yes 🟌 No		
	9. Name and Address of Current	t Registered Agent		. 1	10. Name and Address of New Reg	distered Agent		
	GGS, E. JACKSON		8	1 Name				
	E KENNEDY BLVD			2 Street Add	t Address (P.O. Box Number is Not Acceptable)			
	TE 1700			3	· · · · · · · · · · · · · · · · · · ·			
IAN	IPA FL 33602			<u></u>				
			8	4 City		FL 85	Zip Code	
11. Pursuant office or reagent. La	to the provisions of Sections 607.0503 agistered agent, or both, in the State of familiar with, and accept the obliga	² and 607.1508, Florida Statute: of Florida. Such change was au itions of, Section 607.0505, Flor	s, the about horized to ida Statut	ve-named cor by the corpora es.	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of chang the appointme	ging its registe ent as register	ered red
SIGNATURE	<u> </u>							
	Signature, typed or printed name of registered ager			gent signature requ	ired when re-installing)	DATE	OTODO IN 40	
12.	OFFICERS AND	DELETE	13. 1.1 TOLE	-	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRE		
NAME	BOGGS, E. JACKSON		12 NAMI	1			iongo	
STREET ADDRESS 501 E KENNEDY BLVD #1700				ET ADDRESS				1
CITY-ST-ZIP	TAMPA FL		1.4 CITY					
TITLE	0	DELETE 2				CI	nange 🔲 Ad	dition
NAME	AGLIANO, FRANK T		2.2 NAME					
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP	TAMPA FL		2 4 CITY					
TITLE			3 1 7171.8				nange Ad	iailion
NAME	AFAL FROMTAGE RO		3.2 NAM					
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CITY-ST-ZIP TITLE	D IAMEA EL	DELFTE 4.1		- ST- ZIP	<u> </u>	C	nange Ad	dilion
NAME	PICKERING, MICHAEL J		4. 2 NAV				<u> </u>	
STREET ADDRESS	ARAT LA L MILIO MILIO ARA		l l	E1 ADDRESS				
CITY-ST-ZIP	TAMPA FL		4,4 CITY					
TITLE		DELETE	5:1 TiTLE			CI	nange 🔲 Ad	dilion
NAME			5:2 NAM	F				
STREET ADDRESS			5,3 S1RE	et address				
CITY-ST-ZIP			5.4 CITY				····	
TITLE		☐ DELETE	61 TITLE			☐ C	nange 🔲 Ad	Joition
NAME			6,2 NAM	ì				
STREET ADDRESS			63 STRE	ET ADDRESS				

14. 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 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 changes on an attachment with an address.