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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L2763

(1)

PENGUIN OF TAMPA BAY, INC.

FILED
May 07 1998 8:00am
Secretary of State

Principal Place of Business Mailing Address		I INDIVIDIA INTE ILDII 18818 DILEGA NIVADA NIVA DIDIL DIDIL BIRAN DIDIL BIRIN DIDIL BIRIN DIDIL				
% E. JACKSON BOGGS 501 E KENNEDY BLVD #1700 TAMPA FL 33602	% E. JACKSON BOGGS 501 E KENNEDY BLVD #1700 TAMPA FL 33602	= -	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
2. Principal Place of Business	2a. Mailing Address	11/0 4. FEI N	02/1989 Jumber Applied For			
21	26	59	-2985074 Not Applicable			
Suite, Apt. #, etc. Suite, Apt. #, etc. 27			5. Certificate of Status Desired			
City & State	City & State		ion Campaign Financing \$5.00 May Be Fund Contribution Added to Fees			
Zip Country 25	Zip Coi	4	8. This corporation owes or has paid the current year Intengible Personal Property Tax due June 30. Yes X No			
g. Name and Address of	Current Registered Agent	10. Nam	10. Name and Address of New Registered Agent			
BOGGS, E. JACKSON		81 Name				
501 E KENNEDY BLVD SUITE 1700		82 Street Address (P.O. Box Number is Not Acceptable)				
TAMPA FL 33602						
		84 City	FL 85 Zip Code			

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							
SIGNATURE	Signature, typod or printed name of registered agent and little if applica-	nble (NOTE R	egistered Agent signature	required when reinstating) DAT	E		
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PTS	☐ DÉLETE	1.1 TITLE		L Change	☐ Addition	
NAME	BOGGS, E. JACKSON		1.2 NAME				
STREET ADDRESS	501 E KENNEDY BLVD #1700		1.3 STREET ADDRESS				
CITY-ST-ZIP	TAMPA FL		1.4 CITY-ST-ZIP				
TITLE	D	DELETE	2.1 TITLE		☐ Change	Addition	
NAME	AGLIANO, FRANK T		2.2 NAME				
STREET ADDRESS	5002 NORTH HOWARD AVENUE		2 3 STREET ADDRESS				
CITY-ST-ZIP	TAMPA FL		2. 4 CITY+ST-ZIP				
TITLE	VD	DELETE	3.1 TITLE		Change	Addition	
NAME	MURRAY, JAMES K., JR.		3.2 NAME				
STREET ADDRESS	3501 FRONTAGE RD		13.3 STREET ADDRESS				
CITY-ST-ZIP	TAMPA FL		3.4 CITY-ST-ZIP				
TITLE	D	DELETE	4.1 TITLE		Change	Addition	
NAME	PICKERING, MICHAEL J		4. 2 NAME				
STREET ADDRESS	2727 M L KING BLVD 660		4.3 STREET ADDRESS				
CITY-ST-ZIP	TAMPA FL		4.4 CITY - ST - ZIP				
TITLE		☐ DELETE	5.1 TITLE		Change	Addition	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY - ST - TIP				
TITLE		☐ DELETE	6.1 TITLE		Change	Addition	
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				

CITY-ST-ZIP

14. I 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 13 if changed, controlled the composition of the composition of the composition of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

CR2F024 (10/97)