

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

CORPORATION ANNUAL REPORT 1995



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

**FILED**  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 JAN 17 AM 11:20

DOCUMENT # **L82774** (5)  
1. Corporation Name  
**FIREWORKS USA, INC.**

Principal Place of Business Mailing Address  
**17033 N. CLEVELAND AVENUE NORTH FORT MYERS FL 33903**      **17033 N. CLEVELAND AVENUE NORTH FORT MYERS FL 33903**

DO NOT WRITE IN THIS SPACE

|                                      |                           |   |  |
|--------------------------------------|---------------------------|---|--|
| 2. Principal Place of Business<br>21 | 2a. Mailing Address<br>26 | 3. Date Incorporated or Qualified<br><b>06/25/1990</b>  | 3a. Date of Last Report<br><b>04/06/1994</b> |
| Suite, Apt. #, etc.                  | Suite, Apt. #, etc.       | 4. FEI Number<br><b>65-0198080</b>  | Applied For<br>Not Applicable                |
| City & State<br>22                   | City & State<br>27        | 5. Certificate of Status Desired<br><input type="checkbox"/>  | <b>\$8.75 Additional Fee Required</b>        |
| Zip<br>24                            | Country<br>25             | 6. Election Campaign Financing Trust Fund Contribution<br><input type="checkbox"/>  | <b>\$5.00 May Be Added to Fees</b>           |
| Zip<br>29                            | Country<br>30             | 8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes:<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |

|   |  |   |                       |
|---|--|---|-----------------------|
| 9. Name and Address of Current Registered Agent                             |  | 10. Name and Address of New Registered Agent          |                       |
| <b>TANK, RONALD W.<br/>17033 N. CLEVELAND AVE<br/>N. FT. MYERS FL 33903</b> |  | B1 Name   |                       |
|   |  | B2 Street Address (P.O. Box Number is Not Acceptable) |                       |
|   |  | B3  |                       |
|   |  | B4 City   | <b>FL</b> B5 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 607.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

| 12. OFFICERS AND DIRECTORS |                              | 13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12 |   |
|----------------------------|------------------------------|--|---|
| NAME                       | DP<br><b>TANK, RONALD W.</b> | 1. NAME  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| STREET ADDRESS             | <b>17033 N CLEVELAND AVE</b> | 2. STREET ADDRESS                                      |   |
| CITY & ZIP                 | <b>N FT MYERS FL</b>         | 3. CITY & ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| PHONE                      |                              | 4. PHONE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| STREET ADDRESS             |                              | 5. STREET ADDRESS                                      |   |
| CITY & ZIP                 |                              | 6. CITY & ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| PHONE                      |                              | 7. PHONE   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| STREET ADDRESS             |                              | 8. STREET ADDRESS                                      |   |
| CITY & ZIP                 |                              | 9. CITY & ZIP  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| PHONE                      |                              | 10. PHONE  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| STREET ADDRESS             |                              | 11. STREET ADDRESS                                     |   |
| CITY & ZIP                 |                              | 12. CITY & ZIP   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| PHONE                      |                              | 13. PHONE  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| STREET ADDRESS             |                              | 14. STREET ADDRESS                                     |   |
| CITY & ZIP                 |                              | 15. CITY & ZIP   | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| PHONE                      |                              | 16. PHONE  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

14. I, the undersigned, certify that the information supplied with this filing is complete, furnished and does not qualify for the exempt filing status in Section 131.02(1)(b), Florida Statutes. I further certify that the information included on the 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 person or persons empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 1, or Block 2, of the report, or on an attachment with an address.

SIGNATURE: *Ronald W. Tank*      1-9-95      997-1990  
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR