FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS L90390 DOCUMENT # (0)HOLE (N) THE WALL BAIT SHOP, INC. Principal Place of Business Mailing Address 728 WEST AVE 728 WEST AVE COCOA FL 32927 **COCOA FL 32927** 3. Date Incorporated or Qualified 3a. Date of Last Report 08/01/1990 04/27/1995 2. Principal Place of Business 2a. Malling Address 4 FEt Number Applied For 21 65-0207233 26 Not Applicable Suite, Apt. #, etc. Suite Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zφ $Z_{\rm IO}$ Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Fiorida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DEANS, THOMAS W, ESQUIRE 82 Street Address (P.O. Box Number is Not Acceptable) 1900 S HARBOR CITY BLVD #115 **MELBOURNE FL 32901** 83 84 City 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 Statutes was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature, Spoot or pented name of exposer, Lager training a pro-INDITER gestered Agent signal ire required when remarking (12/95)12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PTD TITLE DELETE 1.1.1.1111 Change Addition YANKO, GARY NAME 1.2 NAME CR2E034 728 W. AVE. STREET ADDRESS 1.3 STREET ADDRESS **COCOA FL** CITY - ST - ZIP 1 4 CITY - ST - ZIF DELETE TITLE 2 1 31116 Change Addition | YANKO, GEORGIA NAME 2.2 NAME 728 W. AVE. STREET ADDRESS 2.3 STREET ADDRESS COCOA FL City-ST-ZIP 24 CHY-ST ZIP DELETE TITLE 3 1 THLE Change Addit on NAME 3.2 NAME STREET ADDRESS 3.3 STHEE! ADDRESS 3.4 CITY - S1 - ZIP CITY-ST-2IP DELETE TITLE 4. 1 TITLE ☐ Change Addition 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS DITY-ST-7IP 44 CHTV - ST - ZIP DELETE TITLE 5 1 TITLE ■ Addition 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TIFLE 6 'TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - 57 - 7/P 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)(k). 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 disclor of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name

SIGNATURE: