

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 18 PM 11:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N17501 (0)

1. Corporation Name

SUNCOAST SUZUKI PLAYERS, INC.

Principal Place of Business

C/O HELENE J. MALPEDE
1212- 44TH STREET WEST
BRADENTON FL 34209

Mailing Address

C/O HELENE J. MALPEDE
1212- 44TH STREET WEST
BRADENTON FL 34209

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/24/1986

3a. Date of Last Report

04/19/1994

4. FEI Number

59-2732722

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)

☐

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

FRANCO, HELENE J. MALPEDE
1212- 44TH STREET WEST
BRADENTON FL 33505

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

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

Helene J. Malpede Franco

Signature, typed or printed name of registered agent and fee (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

4-13-95

12. OFFICERS AND DIRECTORS

TITLE

PD

NAME

FRANCO, HELENE J.

STREET ADDRESS

1212- 44TH STREET WEST

CITY - ST - ZIP

BRADENTON FL

TITLE

DVP

NAME

ROBACK, IRAS L.

STREET ADDRESS

1807-80TH ST. CT. W.

CITY - ST - ZIP

BRADENTON FL

TITLE

D

NAME

ROBACK, JOSEPH

STREET ADDRESS

1807-80TH ST. CT. W.

CITY - ST - ZIP

BRADENTON FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

☐ Change

☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

☐ Change

☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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)(b), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Helene J. Malpede Franco
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Helene J. Malpede Franco

4-13-95

Date

Daytime Phone #

813
747-5338