2006 FOR PROFIT CORPORATION

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FILED

ANNUAL REPORT					May 01, 2006 08:00 AM			
	JMENT # P0100008324		Secretary of State					
1. Entity Nat VERMIL	me ION ENTERPRISES, INC.	7						
f í	ace at Business R. MARTIN LUTHER KING JR. BLVD. 33614	KING IR. BLVD.	d (Becken)	if water ivas? They debit water make	. बेबरेबरे स्थाबक स्थाब शक्या	Diğir Diğiral lı il ribgi		
DO NOT WRITE IN THIS SPA			CE	04282006	No Chg-P	CRZE034 (11	7/05) Applied For	
				59-375			Not Applica	
		7°		5. Certificate	of Status Desired		5 Additional equired	
	6. Name and Address of Current Reg	stered Agent	1		•			
INTRASTATE REGISTERED AGENT CORPORATION 700 BRICKELL AVE STE 3000 MIAMI, FL 33131			_		NOT WI			
the obliga	e named entity submits this statement for the atlans of registered agent. Signature, typed or printed name of registered agent and title		ed Dilice of registe	·	in, in the State of Flor	DATE	with, and scce	
FIL After M	LE NOW!!! FEE IS \$150.00 lay 1, 2006 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.		5.00 May Be ded to Fees				
10.	OFFICERS AND DIRE	CTORS	Į	<u>. </u>	<u> </u>			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STEINBRENNER, GEORGE M III 1 STEINBRENNER DR TAMPA, FL 33614	~			-	- -	<u> </u>	
TATLE NAME STREET ADDRESS CITY-ST-ZP	T BRUNO, ANTHONY 1 STEINBRENNER DR TAMPA, FL 33614			-	0000003 -05/16/06	555075 30019-003	150.00	
TITLE NAME STREET AODRESS CITY-ST-ZIP	S STALLINGS, NORMAN JR 1 STEINGRENNER DR TAMPA, FL 33614			DO	NOT WI	RITE	·	
TITLE NAME STREET ADDRESS CITY-SI-ZIP				IN -	THIS SP	ACE		
TITLE NAME STREET ADDRESS CITY-SI-ZIP								

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report or supplemental 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 507, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

TITLE NAME STREET ADDRESS CITY-ST-ZIP