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PROFIT CORPORATION ANNUAL REPORT



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

1996

P37732

(5)

DOCUMENT # P3

1. Corporation Name

S. B. HOLDING, COMPANY

S B HOLDING COMPANY Principal Place of Business Maling Address								
7627 COURTNEY CAMPBELL CAUSEWAY P.O. BOX 270305 TAMPA FL 33607 TAMPA FL 33688								
					3. Date incorporated or Qualified 03/04/1992	1	e of Last Re /18/1995	•
2. Principal Place of	of Business	2a. 1	Maiting Address		4. FEI Number		I A	pplied For
21		26			59-3100845	-		lot Applicable
Suite, Apt. #, et	tc.	27	Suite, Apt. #, etc.		5. Certificate of Status Desired	X		Additional lequired
City & State			City & State		6. Election Campaign Financing		\$5.00	May Be
23		28			Trust Fund Contribution	<u></u>	Added	to Fees
Zip	Country		Zφ	Country	8. This corporation has liability for	intangible t □ No	ax under s	199.032,
24	25 9. Name and Address of Curre	29 ent Registe	ared Agent	[30]	Florida Statutes		Agent	
	b. Hanc the Apoless of Con-	ciii riogiote	, , , , , , , , , , , , , , , , , , ,	81 Name				
BORRIELLO,	. SUSAN			82 Street Ado	ress (P.O. Box Number is Not Acceptat	ile)		
2522 LAKE (TOO IT TO EXAMPLE IS NOT RECEPTED.			
TAMPA FL 3				83				
				84 City			85 Zip	Code
						FL	- 1 1	
or registered a	agent, or both, in the State of Flo	orida Such e	change was author	rized by the conjugation's boa	oration submits this statement for the pul ard of directors. Thereby accept the app	rpose or cr ointment a	ianging its re s registered	egistered omde agent. Lam
familiar with, a	and accept the obligations of, Se	ection 607.0	505, Flonda Statut	es.				
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SIGNATURESignal	lature, typed or printed hance of registered age OFFICERS A			NOTE Registered April signature regis	ad when him shringi ADDITIONS/CHANGES TO OFF	DATE	D DIRECTO	RS IN 12
Signal	- Landente					ICERS AN	D DIRECTOR	RS IN 12
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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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or or an utachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-29-95
[as 29-28/88