## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 18 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## 1997 POCUMENT # P9200003181 (4)

| Second Processes   Second Proc   | Principal Place<br>2230 W. BAY D        | DEN GLO, INC. e of Business RIVE   | Mailing Address 2230 W. BAY DRIVE  |   |                     |  |  |                                 |
|--|---|--|--|---|---------------------|--|--|---------------------------------|
| 2.   Noting Place of Business   2.   Addition   Addition   2.   Applied for John   2.   Applied for    | LARGO FL 3464                           | 0  | LARGO FL 33770-4903  |   |                     |  | 3a. Date of Last                         | Report                          |
| 28   |   |  |  |   |                     |  |  |                                 |
| Surfect Apid # entry   Surfect Apid #, entry   Surfect | 1                                       |  | <b>⊢</b> ₁ •   | 7   |                     |  |  | <del></del>                     |
| Coy & State   Section Campaigner   Section     |   |  |  | <u> </u>  |                     | ***************************************  | \$0.75                                   |                                 |
| City A State   City A State   City A State     | 22                                      |  | 27   | 27  |                     | 5. Certificate of Status Desired   |  |                                 |
| Zep   Country   Zep   Southery   September   Septemb   | City & State                            |  | · ·  | <del></del>                                       |                     | , -  |  |                                 |
| By Series and Address of Current Registered Agent  10. Name and Address of New Registered Agent  10. Name and Name Agent Agent  10. Name and Address of New Registered Agent  10. Name and Address of New Regi |   |  |  | Country   |                     |  | <del></del>                              |                                 |
| 10.   Name and Address of Current Registered Agent   |   | 25   | 29 30  |   |                     |  |  | S. 195,002,                     |
| 2230 W. BAY DRIVE LARGO FL 34840  82 Street Address (P.O. Box Number is Not Acceptable)  83 84 City FL 85 Zip Code  84 City FL 85 Zip Code  85 Street Address (P.O. Box Number is Not Acceptable)  85 Street Address (P.O. Box Number is Not Acceptable)  86 Street Address (P.O. Box Number is Not Acceptable)  87 88 Street Address (P.O. Box Number is Not Acceptable)  88 Street Address (P.O. Box Number is Not Acceptable)  89 89 80 80 80 80 80 80 80 80 80 80 80 80 80   |   |  | ent Registered Agent   |   |                     | 10. Name and Address of New Re   | gistered Agent                           |                                 |
| LARGO FL 34640   |   |  |  | 81  | Name                |  |  |                                 |
| B3   |   |  |  | 82  | Street Addre        | ess (P.O. Box Number is Not Acceptab   | ole)                                     |                                 |
| The President to the provisions of Sections 607 0502 and 607 1508, Floridal Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent or both, in the State of Floridal Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and accept the objections of Oscion 607 0505, Floridal Statutes.  SIGNATURE  SIGNATURE  12 OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  17. Make  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. ADDITIONS/CHANGES TO OFFICERS AND DIR | LAIN                                    | 30 FL 34040  |  | 83  |                     |  |  |                                 |
| 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 agent for 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 for hoth, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent for familiar with, and accept the objections of Section 607 0505, Florida Statutes.  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  10. OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS IN 12  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. TIME  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  17. MAKE  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  10. OFFICERS AND DIRECTORS IN 12  |   |  |  | -   |                     |  |  |                                 |
| SIGNATURE  |   |  |  | 1 1   | •                   |  | FL                                       | •                               |
| No.    |   | to the provisions of Sections 607.05<br>eg.stered agent or both, in the Stat<br>m familiar with, and accept the obli | 02 and 607.1508, Florida Statul<br>e of Florida. Such change was<br>gations of, Section 607.0505, Fl | tes, the above<br>authorized by<br>orida Statutes | -named corporation  | oration submits this statement for the pon's board of directors. I hereby accept | ourpose of changing of the appointment a | its registered<br>as registered |
| THE   D  | SIGNATURE                               |  |  |   | i signature require |  |  |                                 |
| NAME   STREET ADDRESS   1.3 STREET ADDRESS   1.3 STREET ADDRESS   1.4 CITY-ST-2PP  |   | · · · · · · · · · · · · · · · · · · ·  |  |   | <del></del>         | ADDITIONS/CHANGES TO OFFIC   |  |                                 |
| STREET ADDRESS   LARGO FL 34840  |   |  | ☐ DETEIF   |   |                     |  | LJ Criange                               | : L_I Addition                  |
| LARGO FL 34840   |   | 2230 W. BAY DR.  |  | l t   |                     |  |  |                                 |
| MYERS, JACOB O   10516 SILHAYY DR.   23 STREET ADDRESS   24 CHY-51-ZIP   |   |  |  |   |                     |  |  |                                 |
| 10516 SILHAYY DR.   23 STREET ADDRESS   2 4 CHY-ST-ZIP   2 1 THE   | TIFLE                                   | -  |  |   |                     |  | Change                                   | Addition                        |
| CHY-ST-ZIP   | NAME                                    |  |  | 2.2 NAME  | 1                   |  |  |                                 |
| THE DELETE 31 THE Change Addition NAME 32 NAME SIREET ADDRESS CITY-ST-ZP HILE DELETE 41 THE Change Addition NAME SIREET ADDRESS CITY-ST-ZIP THE DELETE 41 THE Change Addition NAME SIREET ADDRESS CITY-ST-ZIP THE DELETE 51 THE Change Addition NAME SIREET ADDRESS CITY-ST-ZIP THE DELETE 51 THE Change Addition NAME SIREET ADDRESS CITY-ST-ZIP THE DELETE 51 THE Change Addition NAME SIREET ADDRESS CITY-ST-ZIP THE GENAME SIREET ADDRESS CHY-ST-ZIP   |   |  |  |   |                     | ч  |  |                                 |
| NAME   | *************************************** |  |  |   | [-ZIP               |  | Chance                                   | Addition                        |
| STREET ADDRESS   SUM     |   | — · · · · · · · · · · · · · · · · · · ·  |  |   |                     |  | - C11013gs                               | . Fudition                      |
| DELETE   |   |  |  | - · ·   | ADDRESS             |  |  |                                 |
| NAME   | CITY-ST-Z-P                             |  |  | 3.4. CITY - S                                     | r-ZIP               |  |  | <u> </u>                        |
| STREET ADDRESS   |   | ☐ DELEJE   |  | •   |                     |  | Change                                   | Addition                        |
| A4 CITY-ST-ZIP   |   |  |  |   |                     |  |  |                                 |
| DELETE   |   |  |  |   | l l                 |  |  |                                 |
| NAME         52 NAME           STREFT ADDRESS         5.3 STREET ADDRESS           CHY-ST-ZIP         54 CHY-ST-ZIP           THEE         DELETE         61 THE         Change         Addition           NAME         62 NAME         53 STREET ADDRESS         CHY-ST-ZIP           CHY-ST-ZIP         54 CHY-ST-ZIP         54 CHY-ST-ZIP  |   | DELETE   |  |   | - ZIP               |  | Change                                   | a Addition                      |
| CHY-ST-ZIP   |   |  | <del></del>  |   |                     |  |  | —                               |
| THILE         DELETE         6.1 TITLE         Change         Addition           NAME         62 NAME           STREELADORESS         63 STREELADDRESS           CITY-ST-7IP         64 CITY-ST-7IP  | STREET ADDRESS                          |  |  | 5.3 STREET  | ADDRESS             |  |  |                                 |
| NAME         62 NAME           STREET ADDRESS         63 STREET ADDRESS           CITY-ST-7IP         64 CITY-ST-7IP   |   |  |  |   | -ZIP                |  |  | Profession                      |
| STREET ADDRESS   |   |  | ∐ DELETE   |   |                     |  | L.J. Change                              | Addition                        |
| CITY-S1-ZIF 6.4 CITY-ST-ZIP  |   |  |  |   | Innones             |  |  |                                 |
|  |   |  |  |   |                     |  |  |                                 |
| 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  | 14. I do herel                          | L.<br>by certify that the information suppli   | ed with this filing does not qual-   | fy for the exer                                   | nption stated       | in Section 119.07(3)(i), Florida Statute   | s. I further certify the                 | at the                          |