

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

Amended Annual Report

PROFIT
CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra E. Fortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

96 OCT 28 AM 11:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DO NOT WRITE IN THIS SPACE.

DOCUMENT # P92000003767 (0)

1. Corporation Name

LONDON EQUITIES CORP.

Principal Place of Business

3530 FIRST AVENUE, NORTH
SUITE 116
ST PETERSBURG FL 33713

Mailing Address

3530 FIRST AVENUE, NORTH
SUITE 116
ST PETERSBURG FL 33713

2. Principal Place of Business

21 3105 West Waters Ave.

2a. Mailing Address

26 3105 West Waters Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Tampa, FL

City & State

28 Tampa, FL

Zip

24 33614

Country

25 USA

Zip

29 33614

Country

30 USA

9. Name and Address of Current Registered Agent

FORLIZZO, ROBERT A
13577 FEATHER SOUND DRIVE
SUITE 300
CLEARWATER FL 34622

3. Date Incorporated or Qualified

11/05/1992

3a. Date of Last Report

02/14/1994

4. FEI Number

59-3147447

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

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

10. Name and Address of New Registered Agent

81 Name

KOLP, ELI

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

14550 Bruce B. Downs Blvd. Apt. 229

83

84 City

Tampa

FL

85 Zip Code

33613

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

Signature typed or printed name of registered agent and title if applicable

Eli Kolp

(NOTE: Registered Agent signature required when reinstating)

DATE

8/23/96

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

~~PD
CAMPBELL THOMAS
14550 BRUCE B. DOWNS BLVD
TAMPA FL 33613~~

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

~~VP/D
CAMPBELL EDWARD
14550 BRUCE B. DOWNS BLVD
TAMPA FL 33613~~

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

PD
Kolp, Eli
14550 Bruce B. Downs Blvd. Apt. 229
Tampa, FL 33613

☒ Change ☒ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

VP/D
Friedman, Gerald
3530 1st Avenue N., #116
St. Petersburg, FL 33713

☒ Change ☒ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

VP/D
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☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

S/D
Kolpakchi, Zenaida
14550 Bruce B. Downs Blvd. Apt. 229
Tampa, FL 33613

☐ Change ☒ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TD
Kolpakchi, Mordekhai
14550 Bruce B. Downs Blvd. Apt. 229
St. Petersburg, FL 33613

☐ Change ☒ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

V/D
Barrette, Ruth
P.O. Box 350326
Tampa, FL 33695-0326

☐ Change ☒ Addition

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)(4), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Eli Kolp

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/23/96

Date

Daytime Phone

CR2E034 (3/95)