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

PROFIT CORPORATION ANNUAL. REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # PO2000006534 (1)

1	CELLUL			ORS INC.	<i>-</i>	504 (1)	,								
Principal Place of Business Mailing Address											1				
2296 HABERSHAM DRIVE CLEARWATER FL 34524					2296 HABERSHAM DRIVE CLEARWATER FL 34624-3725										
											3.	Date Incorporated or Qualifi	1	Date of Last I	Report
2 21	Principal Place of Business				2a. Mailing Address						4.	FEI Number 59-3153975		<u> </u>	pplied For tot Applicable
22	Sulte, Apt. #, etc.				Suite, Apt. #, etc.				5.	Certificate of Status Desired		1	Additional lequired		
•	City & State				City & State				6.	Election Campaign Financin) May Be		
23	Zip Country			[28] Z _{IP} Co			Country			+	Trust Fund Contribution This corporation has liability	for intens		to Fees	
24		25			29		30		,			Florida Statutes	☐ Yes	☐ No	5. 199.032,
g, Name and Address of Current Registered Agent											10. Name and Address of New Registered Agent				
EVICH, JOSPEH W 2296 HABERSHAM DRIVE								81		Name					
2296 HABEHSI CLEARWATER								82	! Street Addr		ess (P.O. Box Number is Not Acceptable)				
								84 City					ī	-L 85 Zip	Code
11	Pursuant	to the provis	sions of Sect	ions 607.0502	and 607	1508, Florida Sta	lutes, the	above	e-na	med corp	oratio	on submits this statement for t			its registered
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the abover- office or registered agent, or both, in the State of Florida. Such change was authorized by the agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.											101131	board of directors. Thereby a	copt the	арроппион а	a registored
ŞII	SIGNATURE Signature, typed or printed name of registored agent and little if applicable (NOTL Regista									nature require	ed wher	n roinstaling)	DA:	TÉ	
12			Ö	FFICERS AND	DIRECTO		13	١.				ADDITIONS/CHANGES TO O	FFICERS		
111		PT	ACENII.			☐ DELETE		THUE		1				☐ Change	☐ Addition
NAME EVICH, STREET ADDRESS 2296 HJ			BERSHAM DR.				1.2 NAI		s ADDI	ree					
•	Y-ST-ZIP		EARWATER FL						1.3 STREET ADDRESS 1.4 CITY - ST - ZIP						
1111		\$V				☐ DELETE			2.1 TITLE					Change	☐ Addition
NAJ	ME	EVICH, G					22	NAME							
ì	REET ADDRESS 2296 HABERSHAM DR.						2 3 STREET ADDRESS								
	CITY-ST-ZIP CLEARWATER FL								2.4 CITY-ST-ZIP 3.1 TITLE					Change	Addition
NAI				-			3.2 NAMC				2	i ⊂usuge	L Addition		
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711						DEI ETE		1ftE						Change	Addition
NA	ME						4.2	NAME		ļ					
STE	REET ADDRESS						4.3	STREET	T ADDI	RESS					ı
	Y-81-21P					Determ		CITY-S	ST-ZIF	<u> </u>				T 3.	F-Criss
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1	Y-ST-ZIP							STREET CITY-S							
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NA	1					-		NAME							
STREET ADDRESS						6.3 STREET ADD				ess					
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14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

Molar

FILED

Apr 21 1997 8:00am

Secretary of State