SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

** F-	IENT # P92000 RT CONVENIENCE STORE,)		A SKANICAN ING NATUR HALIT BALIT BAKIT	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Principal Place of Business Mailing Address							
2007 E 11TH STREET 2007 E 11TH STREET PANAMA CITY FL 32402 PANAMA CITY FL 32402							
					3. Date Incorporated or Qualified 11/30/1992	3a. Date of Last Report 05/01/1995	
2. Principal Plac	ce of Business	2a, Mailing Address		4. FEI Number	Applied For		
<u></u>		26			59-3150780	Not Applicable	
Suite, Apt #,	elc	Suite, Apt #, etc	-		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	City & State	State		6. Election Campaign Financing	55.00 May Be		
3		28		Trust Fund Contribution	Added to Fees		
Zip	Country	Zip	Country	/	8. This corporation has liability for		
4	25	29	30		Florida Statutes 10. Name and Address of New F	Yes No	
9. Name and Address of Current Registered Agent				Name	IU. Name and Address of New I	tegistorea Agoin	
MOSELEY, FREDERICK D JR			82	Stroot Add	ress (P.O. Box Number is Not Accepta	able)	
	7 E 11TH STREET		02	Street Add	Street Address (F.O. box number is not neceptable)		
PANAMA CITY FL 32402			83				
			84	City		FL 85 Zip Code	
office or reg agent. Lam	gistered agent, or both, in the State of familiar with, and accept the obligation lightere typed or professione of rejected agent	Horida Such change was ons of, Section 607,0505, Fl	authorized by lorida Statutes htt: Registeret Ag	ine corporati	oration submits this statement for the on's board of directors. Thereby acce and when receiving?	DATE	
12.	OFFICERS AND	DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12 Change Add to	
TITLE NAME	P Moseley, Frederick D Jr	Ditter	1.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY - ST - ZIP	PANAMA CITY FL 32405		1 4 CITY -	ST - 2IP			
TITLE	***************************************	DELETE	2 1 TITLE			Change Additi	
NAME			2.2 NAME	1 ADDRESS			
STREET ADDRESS			2 4 CITY				
CITY-ST-ZIP TITLE	DELETE		3 1 TITLE	31 211		Change Additi	
NAME			3 2 NAME				
STREET ADDRESS			3 3 STREE	T ADDRESS			
CITY - ST - ZIP		DOLETO	3.4 CITY	-ST-ZIP		Change Additi	
TITLE		☐ DELETE	4 1 TiTLE 4 2 NAM				
NAME STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			4.4 CITY				
TiTLE	7 ALL W.W.	DELETE	5 1 TITLE			Change Addit	
NAME			5.2 NAME				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP		DELFTE	5.4 C(TY - ST - Z)P 6.1 THLE			Cnange Addit	
TITLE NAME			62 NAMI	1			
STREET ADDRESS				F.1 ADORESS			
0.74 67 70			64 City	- S.I - 7/P			
14. I do hereb further cer		his annual report or supplet r of the corooration or the re	mental annual eceiver or trus	report is true tee empower	alify for the exemption stated in Sector and accurate and that my signature and to execute this report as required by		

SIGNATURE:

SIGNAT

CR2E034 (3/96)