

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 21 AM 9:39

DOCUMENT # P92000012697 (8)

1. Corporation Name

MANTA ENTERPRISES, INC.

Principal Place of Business

Mailing Address

ONE BEACH DRIVE
SUITE 2501
ST. PETERSBURG FL 33701

ONE BEACH DRIVE
SUITE 2501
ST. PETERSBURG FL 33701

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
12/16/1992

3a. Date of Last Report
02/08/1994

4. FEI Number
65-0376486

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

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PECK, EDWIN
259 4TH AVE. N.
ST. PETERSBURG FL 33712

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1608, 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

(Print or Stamp Name of Agent, and Print Name of Corporation)

(Print Registered Agent Signature required when registering)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

P

NAME

SCHINDLER, MILLARD
ONE BEACH DR., SUITE 2501
ST. PETERSBURG FL 33701

STREET ADDRESS

CITY, ST, ZIP

TITLE

S

NAME

REISCHMANN, PAT
11409 8TH ST. NORTH
ST. PETERSBURG FL 33716

STREET ADDRESS

CITY, ST, ZIP

TITLE

V

NAME

JOHNSON, BOB
13080 WILLIAMSFIELD DR.
ELLICOTT CITY MD 21043

STREET ADDRESS

CITY, ST, ZIP

TITLE

T

NAME

SCHINDLER, MARY
ONE BEACH DR., SUITE 2501
ST. PETERSBURG FL 33701

STREET ADDRESS

CITY, ST, ZIP

TITLE

V

NAME

BRYAN, ROBERT
13140 SW 95TH AVE.
MIAMI FL 33176

STREET ADDRESS

CITY, ST, ZIP

TITLE

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY, ST, ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY, ST, ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY, ST, ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY, ST, ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY, ST, ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY, ST, ZIP

ASST. T.

BRYAN, JEAN

6791 S.W. 112ST.

MIAMI FL 33156

14. I, the Secretary, certify that the information supplied with this report is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information included 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, as in the case of the annual report or supplemental annual report. If I change, or am unable to sign, I shall sign the report as required by Chapter 607, Florida Statutes, and that my name appears on the back of this report.

SIGNATURE:

MARY K. SCHINDLER, TREASURER

(Signature and typed or printed name of signing officer on this report)

14 FEB. 1995

(813) 821-6979