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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

P93000016734 (4)

1. Corporation Name

	onn reconocodi, inc.							
Principal Place o	of Business	Mailing Address			i idaileat (in idida titit datit gollt			***************************************
1026 MEADOW ST. PETERSBU		1026 MEADOWLAWN I ST. PETERSBURG FL						
US		US			3. Date Incorporated or Qualified 3a. Date of Last Report 03/03/1993 05/01/1995			
2. Principal Prac	ce of Business	2a. Mailing Address			4. FEI Number			pplied For
<u> </u>		26			59-3179192			lot Applicable Additional
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired			Required	
City & State		City & State			6. Election Campaign Financing		\$5.00	May Be
3		28			Trust Fund Contribution			to Fees
Ζφ 51	Country	Zip	Cour 30	ntry	 8. This corporation has liability for Florida Statutes ☐ Yes 	intangible tax	under s	199.032,
<u> </u>	25 g. Name and Address of Current	Registered Agent	1301		10. Name and Address of New F		gent	
	5, Hallo and Hadibas of Carrell			81 Name				
MARINO, PAUL J			-	82 Street Address (P.O. Box Number is Not Acceptable)				
101 E. K	ennedy BLVD.		L					
STE. 3200				83				
TAMPA F	L 33602			84 City	MANUEL MA	FL	85 Zr	Code
	Signature, typed or printed name of registered agent a			Agent signature require	oJ when reinstang! ADD/TIONS/CHANGES TO OFF	LIATE	DIRECTO	PS IN 12
12. Totle	OFFICERS AND	DIRECTORS	13.	ILE TO THE	ADDITIONS/CHANGES TO OFF		Change	Addition
NAME	HEINRICH, WALTER C	P.J. Decore	1.2 NA	ĺ		-		_
STREET ADDRESS	1026 MEADOWLAND DR. N							
	ST. PETERSBURG FL		13 S!	REFT ADDRESS				
CITY - ST - ZIP	SI. PEIENSBUNG FL			REFT ADDRESS TY S1-ZIP				
	DST	☐ DELETE		TY \$1-ZIP) P] Change	☐ Addition
TITLE	DST MARINO, VICTORIA A	DELETE	1.4 Cf 2 1 Tl 2 2 NA	TY ST-ZIP TLE TME	> P] Change	Addition
TILE NAME STREET ADDRESS	DST Marino, victoria a 1026 Meadowlawn Dr. N	☐ DELETE	1.4 Cr 2 1 Tr 2 2 NA 2 3 ST	TY S1-ZIP TLE ME REET ADDRESS	P] Change	☐ Addition
ITLE IAME STREET AODRESS SITY-ST-ZIP	DST MARINO, VICTORIA A 1026 MEADOWLAWN DR. N ST. PETERSBURG FL 33702		1.4 Cr 2 1 Tr 2 2 NA 2 3 ST	TY S1-ZIP TLE ME REET ADDRESS TY-ST-ZIP	> P		Change	Addition
TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE	DST MARINO, VICTORIA A 1026 MEADOWLAWN DR. N ST. PETERSBURG FL 33702 DV	DETELE	1.4 C/ 2 1 T/ 2 2 NA 2 3 S/ 2 4 C/	TY ST-ZIP THE ME REEL ADDRESS TY-ST-ZIP THE	> P			
ITLE NAME STREET ADDRESS DITY-ST-ZIP DITLE NAME	DST MARINO, VICTORIA A 1026 MEADOWLAWN DR. N ST. PETERSBURG FL 33702		1.4 Cf 2 1 Ti 2 2 NA 2 3 ST 2 4 Cf 3 1 Ti 3 2 NA	TY ST-ZIP THE ME REEL ADDRESS TY-ST-ZIP THE	> P			
ITLE IAME ITREET ADDRESS ITY-ST-ZIP ITLE IAME ISTREET ADDRESS	DST MARINO, VICTORIA A 1026 MEADOWLAWN DR. N ST. PETERSBURG FL 33702 DV FISHER, CHARLES J		1.4 Ct 2 1 Tt 2 2 NZ 2 3 ST 2 4 Ct 3 1 Tt 3 2 NZ 3 3 S	TY S1-ZIP TILE MME REEL ADDRESS TY-ST-ZIP TILE MME	> P] Change	Addition
ITLE IAME STREET ADDRESS SITY-ST-ZIP ITLE NAME STREET ADDRESS STREET ADDRESS	DST MARINO, VICTORIA A 1026 MEADOWLAWN DR. N ST. PETERSBURG FL 33702 DV FISHER, CHARLES J 13926 CHERRY CREEK DR.		1.4 Ct 2 1 Tt 2 2 NZ 2 3 ST 2 4 Ct 3 1 Tt 3 2 NZ 3 3 S	TY S1-ZIP TILE MME REEL ADDRESS TY-ST-ZIP TILE MME TREEL ADDRESS TY-ST-ZIP	> P			
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ITLE HAME THEET ADDRESS ITY-ST-ZIP ITLE HAME STREET ADDRESS CITY-ST-ZIP ITLE HAME	DST MARINO, VICTORIA A 1026 MEADOWLAWN DR. N ST. PETERSBURG FL 33702 DV FISHER, CHARLES J 13926 CHERRY CREEK DR.	DEFELE	1.4 Cf 2 1 Ti 2 2 NA 2 3 SI 2 4 Cf 3 1 Ti 3 2 NA 3 3 S 3 4 Cf 4 1 T 4 2 NA 4 3 SI	TY ST-ZIP THE THE THE THE THE THE THE THE TY-ST-ZIP THE	> P] Change	Addition
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CITY-ST-ZIP TITLE NAME STREET ADDRESS	DST MARINO, VICTORIA A 1026 MEADOWLAWN DR. N ST. PETERSBURG FL 33702 DV FISHER, CHARLES J 13926 CHERRY CREEK DR.	DELETE	1.4 Cf 2 1 Ti 2 2 NJ 2 3 SI 2 4 Cf 3 1 Ti 3 2 NJ 3 3 S 3 4 Cf 4 1 T 4 2 NJ 4 3 SI 4 4 Cf 5 1 T 5 2 NJ 5 3 S 5 4 Cf 6 1 T 6 2 NJ	TY ST-ZIP THE	> P		Change Change	Addition Addition

4. Loo nereby certify that the information supplied with this filing is voluntarily turnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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: VICTORIA A MARINO 4-10-96 (BIS) 8763015