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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

DOOL	1996	A STATE OF THE STA	ISION OF CORPO					
<ol> <li>Corporation</li> </ol>	STI THERTIE	000021213	3 (2)					
MARK	III FUNERAL HOME, IN	NC.			A HORALAGU AND HALOO USED AAN	11 <b>88</b> 44 <b>88</b> 44 <b>88</b> 44	1 (188) (1818 (188	i 11 <b>886</b> (11) ( <b>88</b> )
Principal Plac	e of Business	Mailing Addres	· ·					
7701 W. HILLSBOROUGH AVE.			4207 BAY TO BAY BLVD.					
TAMPA FL 3	33615	TAMPA FL 33	629					
					<ol> <li>Date Incorporated or Qua 03/15/1993</li> </ol>	1	Date of Last R 02/01/190	
t. Principal P	Place of Business	2a. Mailing Add	iress		4. FEI Number	· · · · · · · · · · · · · · · · · · ·		Applied For
Suite, Apt.	#, etc.	Suite, Apt	#, etc.		59-3174632			Not Applicable  Additional
		27			5. Certificate of Status Desire	ed 🗀		Required
City & Stat	te	City & State	9		6. Election Campaign Finance	sing		O May Be
.1	Country	Zip	Co	ountry	Trust Fund Contribution  B. This corporation has liabili	· · · · · · · · · · · · · · · · · · ·		d to Fees
<u>l</u>	9. Name and Address of 0	29	30		Florida Statutes 💟	Yes □No		
	g, Mame and Address of C	Current Hegisterea Agent	<u> </u>	81 Name	10. Name and Address of N	łew Registere	ed Agent	
CURRY,	DIANNE				dress (P.O. Box Number is Not Acc			
	AY TO BAY BLVD.			L. I	aress (F.O. Box number is not acc	жертагле <u>ј</u>		
TAMPA	FL 33629			83		<del></del>		
				84 City			85 Zij	p Code
				1 1 '				
Pursuant or registo	to the provisions of Sections 60 ped agent, or both, in the State of	7.0502 and 607.1508, Florid of Florida. Such change was	da Statutes, the ab authorized by the	pove-named corporation's bo	oration submits this statement for the	ne purpose of	changing its r	egistered office
GNATURE	Signature: Type dior printe ciname of register	ed agent and tite if aporcacle		ove-named corporation's boo	oration submits this statement for the ard of directors. I hereby accept the red when renstating	ne purpose of a appointment	changing its r as registered	egistered office agent. I am
IGNATURE	Signature, Typic Coripmitic manie of register OF FICER	red agent and title if applicable	(NOTE: Registere	ed Agent signature requi		ne purpose of e appointment DATE	changing its r as registered	PRS IN 12
IGNATURE 2.	Signature: Type dior printe ciname of register	ed agent and tite if aporcacle	(NOTE: Flogistere  13.  LETE 1, 1	ed Agent signature requir	red when reinstating)	ne purpose of e appointment DATE	changing its r as registered	
GNATURE  2.  LE	Signature Topic der printe d'aune d'highite OFFICEF D CURRY, DIANNE 4207 BAY TO BAY BLVE	ed agent and the fragrender RS AND DIRECTORS	(NOTE: Bogisters  13. LETE 1.1 1.21	ed Agent signature requi	red when reinstating)	ne purpose of e appointment DATE	changing its r as registered	PRS IN 12
IGNATURF  2. ILE  MME  REEL ADDSESS  IY+SI-ZIP	Signature Typical or printed name of register OFFICEF D CURRY, DIANNE	ed agent and title if a procedure RS AND DIRECTORS  DET  DET	(NOTE Registers 13. LETE 1.1 1.21 1.35 1.4(	ed Agent signature result . TITLE NAME STREET ADDRESS CITY-ST-ZIP	red when reinstating)	ne purpose of e appointment DATE	changing its r as registered	PRS IN 12
CLE  BEET ADDSESS  TY - ST - ZiP	Signature Topic der printe d'aune d'highite OFFICEF D CURRY, DIANNE 4207 BAY TO BAY BLVE	ed agent and the fragrender RS AND DIRECTORS	(NOTE Rogisters  13.  LETE 1.1  1.2)  1.3.5  1.4 (LETE 2.1)	ed Agent signature required.  Title  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	red when reinstating)	ne purpose of e appointment DATE	changing its r as registered	PRS IN 12
CONTURE  2.  ICE  AME  HEET ADDSESS  IY-SI-ZH  ICE  AME	Signature Topic der printe d'aune d'highite OFFICEF D CURRY, DIANNE 4207 BAY TO BAY BLVE	ed agent and title if a procedure RS AND DIRECTORS  DET  DET	(NOTE Registers  13.  LETE 1.1  1.2)  1.3.5  1.4(  LETE 2.1	OD Agent signature results  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	red when reinstating)	ne purpose of e appointment DATE	ND DIRECTO	PRS IN 12
CONATURE  2.  IGE  MME  HEET ADDSESS  IY-SI-ZiP  ILE  MME  REET ADDRESS  IY-SI-ZIP	Signature Topic der printe d'aune d'highite OFFICEF D CURRY, DIANNE 4207 BAY TO BAY BLVE	ed agent and title if a procedure RS AND DIRECTORS  DET  DET	(NOTE Rogisters  13.  LETE 1.1  1.2  1.3  1.4(  2.1  2.2)  2.35	ed Agent signature required.  Title  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	red when reinstating)	ne purpose of e appointment DATE	ND DIRECTO	PRS IN 12
CONATURE  2.  ME	Signature Topic der printe d'aune d'highite OFFICEF D CURRY, DIANNE 4207 BAY TO BAY BLVE	ed agent and title if a procedure RS AND DIRECTORS  DET  DET	(NOTE Rogisters  13. LETE 1.1 1.2) 1.35 1.4( 1.21) 2.21 2.35 2.4( 1.41) 3.1	and Agent signature result  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  TITLE  THE TITLE  THE TITLE  THE TITLE  THE TITLE	red when reinstating)	ne purpose of e appointment DATE	ND DIRECTO	PRS IN 12
GNATURE  LE ME HEEL ADDRESS LY-SI-ZIP LE ME REEL ADDRESS LY-SI-ZIP LE ME REEL ADDRESS	Signature Topic der printe d'aune d'highite OFFICEF D CURRY, DIANNE 4207 BAY TO BAY BLVE	ed agent and lite if a procedure RS AND DIRECTORS  DEI  DEI	(NOTE Registers  13. LETE 1.1 1.21 1.33 1.4( LETE 2.1 221 235 24( LETE 3.1 321	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	red when reinstating)	ne purpose of e appointment DATE	ND DIRECTO Change	PRS IN 12 Addition Addition
CONATURE  2.  LE  ME  ME  HEEL ADDRESS  IY-SI-ZIP  LE  ME  HEEL ADDRESS  IY-SI-ZIP  IF  ME  ME  HEEL ADDRESS	Signature Topic der printe d'aune d'highite OFFICEF D CURRY, DIANNE 4207 BAY TO BAY BLVE	ed agent and lite if a procedure RS AND DIRECTORS  DEI  DEI	(NOTE Registers  13. LETE 1.1 1.21 1.33 1.4( LETE 2.1 2.21 2.33 2.4( LETE 3.1) 3.21 3.31	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	red when reinstating)	ne purpose of e appointment DATE	ND DIRECTO Change	PRS IN 12 Addition Addition
GNATURE  2.  LE ME ME HEET ADDRESS IY-SI-ZIP LE ME HEET ADDRESS Y-SI-ZIP LE ME HEET ADDRESS Y-SI-ZIP LE ME HEET ADDRESS Y-SI-ZIP	Signature Topic der printe d'aune d'highite OFFICEF D CURRY, DIANNE 4207 BAY TO BAY BLVE	ed agent and lite if a procedure RS AND DIRECTORS  DEI  DEI	(NOTE Registers  13. LETE 1.1 1.21 1.33 1.4( LETE 2.1 2.21 2.35 2.4( LETE 3.1) 3.21 3.31 3.34	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	red when reinstating)	ne purpose of e appointment DATE	ND DIRECTO Change	PRS IN 12 Addition Addition
IGNATURE  2.  ICE  MME  HEEL ADDRESS  IV-SI-ZIP  ICE  ME  HEEL ADDRESS  IY-SI-ZIP  IE  ME  HEEL ADDRESS  IY-SI-ZIP  IE  ME  HEEL ADDRESS  IY-SI-ZIP  IE  ME  ME  ME	Signature Topic der printe d'aune d'highite OFFICEF D CURRY, DIANNE 4207 BAY TO BAY BLVE	Pedagent and lite if a recreate PRS AND DIRECTORS DEL DEL DEL	(NOTE Registers  13.  LETE 1.1  1.2!  1.35  1.4(  LETE 2.1  2.21  2.35  2.44  3.11  3.21  3.21  3.21  4.1	TITLE NAME STREET ADDRESS CITY-ST-ZIP	red when reinstating)	ne purpose of e appointment DATE	ND DIRECTO Change Change	PRS IN 12 Addition Addition
GNATURE  2.  LE  ME  ME  ME  ME  ME  ME  ME  ME  ME	Signature Topic der printe d'aune d'highite OFFICEF D CURRY, DIANNE 4207 BAY TO BAY BLVE	Pedagent and lite if a recreate PRS AND DIRECTORS DEL DEL DEL	(NOTE Registers  13.  LETE 1.1 1.2! 1.35 1.4( 1.21) 2.21 2.25 2.4( 1.22) 3.21 3.21 3.21 3.21 4.24 4.35	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  VAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  VAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  VAME  STREET ADDRESS	red when reinstating)	ne purpose of e appointment DATE	ND DIRECTO Change Change	PRS IN 12 Addition Addition
GNATURE  LE ME	Signature Topic der printe d'aune d'highite OFFICEF D CURRY, DIANNE 4207 BAY TO BAY BLVE	Pedagent and lite if a recreate PRS AND DIRECTORS DEL DEL DEL	(NOTE Registers  13.  LETE 1.1  1.21  1.35  1.4(  LETE 2.1  2.21  2.35  2.44  3.11  3.21  3.21  4.21  4.21  4.35  4.40	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  VAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  VAME  STREET ADDRESS  CITY-ST-ZIP	red when reinstating)	ne purpose of e appointment DATE	ND DIRECTO Change Change	PRS IN 12 Addition Addition Addition
GNATURE  2.  LE  ME  ME  HEET ADDSESS  IY-ST-ZIP  LE  ME  HEET ADDFESS  Y-ST-ZIP  LE  ME  HEET ADDRESS  Y-ST-ZIP  LE  ME  HEET ADDRESS  Y-ST-ZIP  LE  ME  HEET ADDRESS	Signature Topic der printe d'aune d'highite OFFICEF D CURRY, DIANNE 4207 BAY TO BAY BLVE	DEL	(NOTE Registers  13.  LETE 1.1  1.2!  1.3.  1.4(  LETE 2.1  2.2!  2.3.  2.4(  LETE 3.1'  3.2!  3.4(  4.2.)  4.2.)  4.3.  4.4.  LETE 5.1'	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  VAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  VAME  STREET ADDRESS  CITY-ST-ZIP	red when reinstating)	ne purpose of e appointment DATE	ND DIRECTO Change Change	PRS IN 12 Addition Addition
GNATURE  LE ME HEET ADDSESS IY-ST-ZIP LE ME HEET ADDRESS IY-ST-ZIP LE ME HEET ADDRESS Y-ST-ZIP LE ME HEET ADDRESS Y-ST-ZIP LE ME HEET ADDRESS	Signature Topic der printe d'aune d'highite OFFICEF D CURRY, DIANNE 4207 BAY TO BAY BLVE	DEL	(NOTE Registers  13. LETE 1.1 1.2! 1.35 1.4( 1.21) 2.21 2.35 2.4( 1.22) 3.31 3.4( 1.32) 4.4( 4.24) 4.35 4.4( 5.11) 5.26	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  VAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	red when reinstating)	ne purpose of e appointment DATE	ND DIRECTO Change Change	PRS IN 12 Addition Addition Addition
IGNATURE  2.  IGE  MME  HEET ADDRESS  IY-SI-ZIP  ITE  MME  HEET ADDRESS  IY-SI-ZIP	Signature Topic der printe d'aune d'highite OFFICEF D CURRY, DIANNE 4207 BAY TO BAY BLVE	DEL	(NOTE Registers  13. LETE 1.1 1.2! 1.35 1.4( 1.21) 2.21 2.35 2.4( 1.34) 3.34 3.34 4.40 4.35 4.40 5.11 5.2M 5.38	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  VAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  VAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  VAME  STREET ADDRESS  CITY-ST-ZIP	red when reinstating)	ne purpose of e appointment DATE	ND DIRECTO Change Change Change	PRS IN 12 Addition Addition Addition Addition Addition
IGNATURE  2.  ILE  AME  IREET ADDRESS  IY-SI-ZIP  ILE  AME  IREET ADDRESS  IY-SI-ZIP  ILE  AME  IREET ADDRESS  IY-SI-ZIP  ILE  IREET ADDRESS  IY-SI-ZIP  ILE  IREET ADDRESS  IY-SI-ZIP  ILE  ILE  ILE  ILE  ILE  ILE  ILE  I	Signature Topic der printe d'aune d'highite OFFICEF D CURRY, DIANNE 4207 BAY TO BAY BLVE	DEL	## (NOTE Registers   13   13   14   12   13   14   15   15   15   15   15   15   15	TIPLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	red when reinstating)	ne purpose of e appointment DATE	ND DIRECTO Change Change	PRS IN 12 Addition Addition Addition Addition
2.  ICE  AME  IREE LADDRESS  ITY-ST-ZIP  ICE  ICE  ICE  ICE  ICE  ICE  ICE  I	Signature Topic der printe d'aune d'highite OFFICEF D CURRY, DIANNE 4207 BAY TO BAY BLVE	DEL	## (NOTE Registers   13   13   14   12   13   14   15   15   15   15   15   15   15	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	red when reinstating)	ne purpose of e appointment DATE	ND DIRECTO Change Change Change	PRS IN 12 Addition Addition Addition Addition Addition
2.  JULE  AME  IRELI ADDRESS  TY-ST-ZIP  THE  AME  IRELI ADDRESS  HY-ST-ZIP  TLE  AME  IRELI ADDRESS  LY-ST-ZIP  TLE  AME  IRELI ADDRESS  LY-ST-ZIP  LE  AME	OFFICER  D  CURRY, DIANNE  4207 BAY TO BAY BLVC  TAMPA FL 33629	DEL	### (NOTE Flogsters   13.   13.   1.2   1.3   1.4 (	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  VAME  STREET ADDRESS  CITY-ST-ZIP	red when reinstating)	ne purpose of a appointment	ND DIRECTO Change  Change  Change  Change	PRS IN 12 Addition Addition Addition Addition Addition Addition

SIGNATURE:

resident

(813) 831-9444