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

CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

P93000022317 (0) **DOCUMENT #**

1. Corporation Na FRIEND &				,				
Principa Piace of E	Business	Mailing Add	lress				FOUL BEING DIRIC HOUR DAY	}} (10)) 10)) 10)
1300 N WESTSHORE BLVD		1300 N W	1300 N WESTSHORE BLVD					
SUITE 140			SUITE 140					
TAMPA FL 33607	4618	TAMPA FL	TAMPA FL 33607-4618			Date Incorporated or Qualified	3a. Date of Last F	Ponort
						03/25/1993	01/26/19	
2. Principal Place of Business		2a. Mailing Address				4. FEI Number	-1	Applied For
21		26				59-3172441	├ ── ∔	Not Applicable
Suite. Apt. #, e	ito		pt. #, etc.		•		\$8.7	5 Additional
22		27	27			5. Certificate of Status Desired Fee Required		
City & State		City & S	City & State			6. Election Campaign Financing \$5.00 May Be		
23		28				Trust Fund Contribution		ed to Fees
Zφ	Country	Zip		Counti	У	8. This corporation has liability for		199.032,
24	25	29		30			. □No	
	9. Name and Address of Cu	irrent Registered Ag	ent		41-1	10. Name and Address of New I	tegistered Agent	
-	_			8	¹ Name F	Friend, Jed		
JRIEND, JED			8:	2 Street Ack	dress (P.O. Box Number is Not Acceptal	ole)		
	STSHORE BLVD			<u> </u>		same		
SUITE 140				B:	3			
TAMPA FL				4 City		85 Z	ip Code	
					<u></u>		FL " *	
or registered a familiar with, a SiGNATURE	agent, or both, in the State of and accept the obligations of,	Florida, Such change Section 607.0505, Flo	was authoriz orida Statutes	ed by the cor	poration's bo	oration submits this statement for the pu ard of directors. I hereby accept the app	ointment as registered	d agent. I am
	where typed or profied name of registered		(NO	TE Registered Ag	ent signature requi	red when reinstaling)	DATE	
12.		AND DIRECTORS		13.		ADDITIONS/CHANGES TO OF		· · · · · · · · · · · · · · · · · · ·
	D FDIEND IED	L.] DELETE	1. 1 T(TL)	f		☐ Change	☐ Addition
	FRIEND, JED	ED (1) HTE 446		1.2 NAM				
STREET ADDRESS 1300 N WESTSHORE BLVD S		/D SUITE 140	SUITE 140		E1 ADDRESS			
	TAMPA FL 33607-4618			1 4 CiTY				
71116		L] DELETE	2 1 7/11			Change	Addition
NAME				2 2 NAM				
STREET ADDRESS				2 3 STAE	ET ADDRESS			
Cith -ST-ZiP] DELETE	2.4 C/TY			F3 (\)	FT dading
THEF		L] DELETE	3 1 TiTL			☐ Change	Addition
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] DELETE	3.4 CHY 4.1 THE			Change	Addition
NAME		L	3 Decemb	4 2 NAM			L_J Change	L.J. Addition
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STREE* ACCURESS					ET ADDRESS			
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NAME		L	,	5 2 NAM			FT wande	
STHEET ADDRESS					ET ADDRESS			
CITY - ST-ZIP				5.4 CITY				
TILLE		Г	DELETE	6. 1 TITL			Change	☐ Addition
NAME		_		6.2 NAM				_
STREET ADDRESS					ET ADDRESS			
2 to 20 miles				0.55176				:

14. I do hereby certify that the information supplied with this filing is voluntarily furnished 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 cath; that I arm an officer or director of the corporation or the receiver or trusts is empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or on an attachment with an address.

SIGNATURE:

Jed Friend 1/19/96 (813) 289-8860