## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000037351 (2)

GIZMO OF TAMPA, INC.

Principal Place of Business Mailing Address 38041 ARCHER AVE. 38041 ARCHER AVE. ZEPHYRHILLS FL 33541 ZEPHYRHILLS FL 33541 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/25/1993 Applied For 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 21 26 59-3181247 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Ζip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name WATKINS, CARL T CPA 7345 JACKSON SPRINGS ROAD Street Address (P.O. Box Number is Not Acceptable) STE. 3 83 **TAMPA FL 33634** 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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** (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Addition Change TITLE 1.1 TITLE GRIMLEY, SHANNON NAME 1.2 NAME 38041 ARCHER AVENUE STREET ADDRESS 1.3 STREET ADDRESS ZEPHYRHILLS FL CITY-ST-ZIP 1.4 City-St-ZiP DELETE Addition Change TITLE 2.1 TITLE GRIMLEY, DANA M NAME 2.2 NAME 38042 ARCHER AVENUE STREET ADORESS 2.3 STREET ADDRESS ZEPHYRHILLS FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP Change DELETE Addition 41 TITLE TITLE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITLE 51 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP

14. Hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 receivor 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 or an attachment with an address.

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

SIGNATURE:

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

4000

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SHAMON CRIMEY

4/5/98

813-398-4955

Change

■ Addition

**FILED** 

Apr 14 1998 8:00am

Secretary of State