

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P93000043987 (5)

1. Corporation Name  
PREMO'S INC.



Principal Place of Business  
261 MONTE CRISTO BLVD  
TIERRA VERDE FL 33715  
US

Mailing Address  
P O BOX 66629  
ST PETERSBURG FL 33736  
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified  
06/22/1993

3a. Date of Last Report  
04/20/1995

4. FEI Number  
59-3191122

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PREMO, LINDA G  
261 MONTE CRISTO BOULEVARD  
TIERRA VERDE FL 33715

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 607.1508, 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

Signature typed or printed name of registered agent and the corporation

NOTE: Registered Agent Signature required whenever registering

DATE

12. OFFICERS AND DIRECTORS

1. TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
D  
PREMO, LINDA  
261 MONTE CRISTO BOULEVARD  
TIERRA VERDE FL

☐ DELETE

2. TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

3. TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

4. TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

5. TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

6. TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1. 1. TITLE  
12 NAME  
13 STREET ADDRESS  
14 CITY - ST - ZIP

2. 1. TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY - ST - ZIP

3. 1. TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY - ST - ZIP

4. 1. TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY - ST - ZIP

5. 1. TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY - ST - ZIP

6. 1. TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY - ST - ZIP

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 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: Linda Premo Linda G. Premo

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

14-15-96 813/866-7766

CR2E034 (12/95)