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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

poratio	IMENT # P9300 SERT & SON, INC.							
al Plac	e of Business	Mailing Address		······································	1 INSKKEDT AND INDIGE LINKY EDIYA (CAN	II OCHR ODHU DHQ	i dhaal haad a	INIK BOH 1001
S ASHLEY DR 1745 IPA FL 33602		100 S ASHLEY DR STE 1745 TAMPA FL 33602						
					<ol> <li>Date Incorporated or Qualified</li> <li>09/10/1993</li> </ol>		of Last Re 28/199	
opal P	Place of Business	2a. Mailing Address			4. FEI Number			oplied For
e Ant	# otc	Suite Act to ste			59-3203582			lot Applicabl
ite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75 Additional Fee Required		
& Stat	te	City & State			Election Campaign Financing     Trust Fund Contribution			May Be
 ) 	Country	Z <sub>I</sub> p	Cou	untry	8. This corporation has liability to	or intangible tax		to Fees 199.032
	25	29	30		Florida Statutes Ye	es 🗌 No		
	9. Name and Address of Curre	ent Registered Agent		81 Name	10. Name and Address of New	Registered A	gent	
IODBI	ICH, LAURENCE I							
	SHLEY DR			82 Street Add	dress (P.O. Box Number is Not Accepta	ablo)		
E 174				83		··		
TAMPA FL 33602								
WI 73 F				84 City			05 7in	Codo
	to the provisions of Sections 607.050 red agent, or both, in the State of Flor ith, and accept the obligations of, Sec				oration submits this statement for the pr ard of directors. I hereby accept the ap		1 1 '	Code gistered office agent. I am
rsuant register riller wi	to the provisions of Sections 607.050 red agent, or both, in the State of Flor ith, and accept the obligations of, Sections of			ove-named corporation's boa		urpose of chan pointment as n DATE FICERS AND I	nging Its re	gistered offic agent. I am
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SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-2-96 404-264 9827