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PROFIT CORPORATION **ANNUAL REPORT**

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000011971

TAMPA ENTERTAINMENT CENTER, INC.

FILED May 07, 1999 8:00 am Secretary of State

05-07-1999 90147 014 ***150.00



Principal Place of Business Mailing Address								1 10011381 1101011 UITH 10111 UITH 10111 UI	,,,, nai), aa,,,,	184) 11318	(שמו למנו נספאו ונועו
3450 E. FLETCHER AVE. 3450 E. FLETCHER AVE. SUITE 300 SUITE 300 TAMPA FL 33613 TAMPA FL 33613							DO NOT WR	ITE IN THIS	SPACE		
							3.	Date Incorporated or Qualifed 02/14/1994	_	_	
2. Principal Pl	ace of Business	2a	. Mailing Address				4.	FEI Number			Applied For
21		26						65-0 <u>475</u> 237			Not Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.					Certifcate of Status Desired			5 Additional
22		27				J.	Ocitions of Otalus Besides		Fe	e Required	
City & State	е	<u> </u>	City & State				6.	Election Campaign Financing			00 May Be
23	· · · · · · · · · · · · · · · · · · ·	28						Trust Fund Contribution		Add	led to Fees
Zip	Country	<u> </u>	Zip		ountry	1	8.	This corporation owes the curr	rent year Inta	angible Yes	- All-
24	25	29	Anne	30				Personal Property Tax. Name and Address of New I	Pagistared		₩o
·	9. Name and Address of Curre	nt Regis	stereu Agent		81	Name		. Name and Address of New I	registered	gent	
сон	EN, ROBERT				L						
14120 FENNSBURY DR.						Street /	Address (P	dress (P.O. Box Number is Not Acceptable)			
TAM	PA FL 33624				83	1					
					84	City				85	Zip Code
						'			FL		
11. Pursuant f office or re agent. I ar	to the provisions of Sections 607.05 egister a agent, or both, in the State m fair view, with, and become oblig	02 and 6 of Flori a	07.1508, Florida State da. Such change was n 607.0505 F	utes, the authorize Iorida Sta	above ed by a	e-named the corpo	corporation oration's bo	n submits this statement for the pard of directors. I hereby acce	purpose of pt the appoin	changin ntment a	g its registered is registered
SIGNATURE	Sig yped or printed name or regratorous up		- applicable		· ·	,	equired when re	rainetaling)	DATE		
12.	Sig vped or printed name or regrational up			13		it signature to		ADDITIONS/CHANGES TO OF		D DIRE	CTORS IN 12
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	. —			1.4	CITY-S	T-ZIP					
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plied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informat lemental 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 I hereby certify that the information supplied indicated on this annual report or supplieme officer or director of the corporation of 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, by on an attachment with an address, with all other like empowered.

SIGNATURE: