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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #  1. Corporation Name	P94000018844 (8)	
OZELLO INVESTMENTS, INC.		

Mailing Address Principal Place of Business 17960 GULF BLVD. 17960 GULF BLVD. **LINIT 122** UNIT 122 **REDINGTON SHORES FL 33708** REDINGTON SHORES FL 33708 3a. Date of Last Report 3. Date Incorporated or Qualified 03/09/1994 04/18/1995 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 59-3229805 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc 5. Certificate of Status Desired Fee Required 22 City & State 6. Election Campaign Financing \$5.00 May Be City & State  $\Box$ Trust Fund Contribution Added to Fees 28 23 This corporation has liability for intangible tax under s 199.032, Florida Statutes Country Zω Žιρ Country 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) YOUHN, LAURENCE T 17960 GULF BLVD. 83 **UNIT 122 REDINGTON SHORES FL 33708** 85 Zip Code 84 LADIAN, SHUZZE 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 hoard of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the objections of Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed own e of depisterial agent and tito if application (NOTE: Registered Agent signature required when rehistating) CR2E034 (12/95) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. 19920 GULFRIND #9 Change Addition

/NOIRN SHORES FE 34635 DELETE 1.11008 TITLE YOUHN, LAURENCE T 1.2 NAME NAME 17960 GULF BLVD., UNIT 122 1.3 STREET ADDRESS STREET ADDRESS **REDINGTON SHORES FL 33708** 1.4 CITY - ST - ZIP DITY-ST-ZIP DELFTE Change Addition 2 1 TILE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY - \$1 - ZIP CITY-ST-ZIP Change ☐ Addition DELF 1E TITLE 3 1 TITLE 32 NAME NAMÉ 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY - ST - 2IF CITY-ST-ZIP ☐ Addition DELETE 4 1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Addition 5 1 THILE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 6 1 TITLE TITLE 6.2 NAME NAME 63 STREET ADDRESS STREET ADDRESS 6.4 CHY+ST-ZIP 14. If do hereby certify that the information supplied with this fling 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 trusted 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: \_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF