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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## FILED Feb 07 1997 8:00am Secretary of State

Daytime Phone #

1997

CITY - ST - ZIP

SIGNATURE:

DOCUMENT # P94000019334 (9)

FELLENZ ENTERPRISES, INC.

Principal Place of Business Mailing Address 1465 40TH AVE NE 1465 40TH AVE NE ST PETERSBURG FL 33703-5472 ST PETERSBURG FL 33703 3. Date Incorporated or Qualified 3a. Date of Last Report 03/09/1994 02/05/1996 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 21 925 LINE OAK TER. NE 925 LIVE OAK TEN. NE 59-3233839 Not Applicable Suite, Apt #, etc. \$8.75 Additional П 5. Certificate of Status Desired Fee Required City & State Cily & State 6. Election Campaign Financing \$5.00 May Be 23 ST PETERSBURG, FL 28 ST. PETERSBUNG **Trust Fund Contribution** Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, PINGULAS 25 PINGULAS 33703 🖫 Yes 🔲 No 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name BROIDA & MCKINNEY, P.A. 605 75TH AVE 82 Street Address (P.O. Box Number is Not Acceptable) ST PETERSBURG BEACH FL 33706 83 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 land accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed rame of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1 1 TITLE FELLENZ, LLOYD E JR. NAME 1.2 NAME FELGAZ, LLOYD E. JR. 1465 40TH AVE NE 925 LIVE OAK TER. NE 1.3 STREET ADDRESS STREET ADDRESS ST PETERSBURG FL 33703 1.4 CITY - ST - ZIP ST. PETENSBURG FL CITY-ST-7IP Change DELETE Addition THLE 2.1 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change 3.1 TITLE Addition TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-S1-ZIP DELETE 4.1 TITLE Change Addition TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP C(TY - ST - ZIP DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY - ST - ZIP TITLE □ DELETE 6.1 TITLE ☐ Change Addition 6.2 NAME NAME STREET ADDRESS **6.3 STREET ADDRESS** 

6.4 CITY-ST-ZIP

14. I do 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 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