## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1997 DOCUMENT # P94000020335 (3)

Principal Place of Business Mailing Address 517 W. JERSEY AVENUE 517 W. JERSEY AVENUE BRANDON FL 33510 BRANDON FL 33510-3030										
					3.	Date incorporated or 0	Dualified		te of Last R	leport
			· · · · · · · · · · · · · · · · · · ·			03/14/1994		05/0	01/1996	
2. Principal Place of Business 21 333 N. Falkenburg Rd 22 333 N. Falkenburg Rd 23 333 N. Falke			anhuwa I	1.4	4.	FEI Number			P	oplied For
21 333 N. Falkenburg Rd 2 Suite, Apt #, etc		Suite, Apt. #, etc.	26 333 N. Falkenburg Rd			<u>59-3229657</u>		<del>_</del>		ot Applicable
22 B-215		27 B-215	27 B-215			Certificate of Status De	estred			Additional equired
City & State  23 Tampa Fl		City & State  28 Tampa Fl	_		6.	Election Campaign Fin Trust Fund Contribution				May Be to Fees
Zip 33619	Country Zip 3619 USA 29 33619			Country Sol USA		This corporation has li			tax under s	
24	30 02.	<u>-</u>	10	Florida Statutes Name and Address o		Yes				
9. Name and Address of Current Registered Agent CALLEJA, GUY R								3	-	···
517 W. JERSEY AVENUE				Chront A	ddroon /D	O. Box Number is Not	Accordat	hla)	<del></del>	
BRANDON FL 33510				Street At	daress (P	O, BOX NUMBER IS NOT	Acceptai	зюј		
			83							
			84	City				FL	85 Zip	Code
11. Pursuarit office or r agent. La SIGNATURE	to the provisions of Sections 607.05 registered agent, or both, in the Statum familiar with, and accept the obliging the status of the status		tes, the above authorized by orida Statutes IE: Registered Age				it for the p aby acce	purpose of pt the appo	changing in intment as	is registered registered
12. OFFICERS AND DIRECTORS			13.	ra algosture re		ADDITIONS/CHANGES	TO OFFIC	DATE CERS AND	DIRECTOR	S IN 12
1/11/1	P	☐ DELETE	1.1 TITLE				10 01110		Change	Addition
NAME	CALLEJA, GUY R		1.2 NAME					•		
STREET ADDRESS	517 W JERSEY AVE		1.3 STAEET	ADDRESS :	333 N	. Falkenburg	Rd.	B-215		
C(1Y-S1-Z)P			1.4 CiTY+S	r-zip ŗ	Tampa	FL 33619				
TITLE		☐ DELETE	2.1 TITLE						Change	Addition
NAME			2.2 NAME							
STREET ADDRESS			2.3 STREET							
CITY-ST-ZIP TITLE		DELETE	2.4 CITY - 5	ST-ZIP					Change	Addition
NAME		Las pecete	3.2 NAME		•			1	Criange	L. Addition
STREET ADDRESS			3.3 STREET	PSANINA						
CITY ST-ZIP			3.4. CITY-5							
TITLE		DELETE	4.1 TITLE						Change	Addition
NAME			4. 2 NAME						-	
STREET ADDRESS			4.3 STREET	ADDRESS		•				
CITY - ST - ZIP			;4.4 CITY-S	T-ZIP						
TITLE		☐ DELETE	5.1 TITLE						Change	Addition
NAME		•	5.2 NAME			•				
STREET ADDRESS			5.3 STREET	ADDRESS						

6.4 CHTY-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 a hual 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 receipt or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or B

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

**SIGNATURE** 

CHTY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

DELETE

(813) 653-**205**2 4/22/97

Date

**FILED** 

May 02 1997 8:00am

Secretary of State

☐ Change

\_\_\_ Addition