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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 12 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000021472 (3)

| TURBO  | DOG, INCORPORATED  |   |                                    | .   | )<br>                               |
|--|--|---|------------------------------------|---|-------------------------------------|
| Principal Place of Business 14601 ORANGE AVENUE BLDG. 3 FORT PIERCE FL 34982 |  | Mailing Address 14801 ORANGE AVENUE BLDG. 3 FORT PIERCE FL 34945-4512 |                                    |   |                                     |
|  |  |   |                                    | <ol> <li>Date Incorporated or Qualified<br/>03/21/1994</li> </ol>                   | 3a. Date of Last Report 05/01/1996  |
|  | Place of Business  | 2a. Mailing Address   |                                    | 4. FEI Number   | Applied For                         |
| Sulte, Apt. #, etc.  |  | 26  |                                    | 65-0482206  | Not Applicable                      |
| 22   |  | 27 Suite, Apr. #, etc.  |                                    | 5. Certificate of Status Desired  | S8.75 Additional Feo Regulred       |
| City & State   |  | City & State  |                                    | 6. Election Campaign Financing  | \$5.00 May Be                       |
| 23   |  | 28  |                                    | Trust Fund Contribution   | Added to Fees                       |
| Zip  | Country  | Zip   | Country                            |   | or intangible tax under s. 199.032, |
| 24   | 9. Name and Address of Current   | 29  <br>  Registered Agent  | 30                                 | Florida Statutes  10. Name and Address of New I                                     | Yes No                              |
| KIRS   | SCH, JEFFREY M ESQ.  | Trogistored rigorit   | 81 Name                            |   |                                     |
|  | SEMINOLE STREET  |   | 00 0                               | NESTOR /ALM<br>dress (P.O. Box Number is Not Accept                                 | ELO                                 |
| STUART FL 34994  |  |   | 82 Street Ad                       | GOI ORANGE  | able)                               |
|  |  |   | 83                                 | CRANCE  | A 2                                 |
|  |  |   | 84 City                            |   | 7:- 0-1                             |
|  |  |   | fo                                 | RT PIERCE   | FL 85 Zip Code 45                   |
| <ol> <li>Pursuant<br/>office or r</li> </ol>                                 | to the provisions of Sections 607.0502 registered agent, or both, in the State | and 607,1508, Florida State   | ites, the above-named co           | orporation submits this statement for the ration's board of directors. I hereby acc | purpose of changing its registered  |
| agent. I a   | im familiar with, and an ept the obliga-                                       | mis of, Somon 607.0505, F   | lorida Statutes                    | ration's board of directors, I hereby acc   | con the appointment as registered   |
| SIGNATURE  | Signature Thodar amitted arms of regist and abort                              | emis  | fee                                | ·   |                                     |
| 12.  | Signature Groder antito darno of registrate ager<br>OFFICERS AND               |   | TI Progistered Agent signature red | pulsed where reinstating)  ADDITIONS/CHANGES TO OFF                                 | [MI]                                |
| TITLE  | D  | DELETE  |                                    | NESTER PALMERO  |                                     |
| NAME   | Palmero, Frank   |   | 1.2 NAME                           | 1460, ORANGE A  | ].                                  |
| STREET ADDRESS   | 14601 ORANGE AVENUE BLDG   | ì. 3  |                                    | FORT PIERCE, FL.  |                                     |
| CITY-ST-ZIP  | FORT PIERCE FL 34982   |   | 1.4 C(TY - S1 - 2(P                | ( DRI TIERGE , 12.  | 54175                               |
| TITLE  | NESTOR PALMERA   | DELFTE  | 2.1 TITLE                          |   | Change Addition                     |
| NAME .   | M-D-S-LOK LVCAVIEW   | •   | 2.2 NAME                           |   |                                     |
| STREET ADDRESS   |  |   | 2.3 STREET ADDRESS                 |   |                                     |
| CITY-ST-ZIP<br>TITLE   |  | DELETE  | 2. 4 CITY-ST-ZIP                   |   |                                     |
| NAME   |  | L DECEIL  | 3.1 TOLE<br>3.2 NAME               |   | L Change Addition                   |
| STREET ADDRESS   |  |   | 3.2 NAME<br>3.3 STREET ADDRESS     |   |                                     |
| CITY-ST-ZIP  |  |   | 3.4. City-\$1-7iP                  |   |                                     |
| TITLE  |  | DELETE  | 4.1 DILE                           | **************************************  | Change Addition                     |
| NAME   |  |   | 4. 2 NAME                          |   |                                     |
| STREET ADDRESS   |  |   | 4 3 STREET ADDRESS                 |   |                                     |
| CITY-ST-ZIP  |  |   | 4.4.CITY-ST-7/P                    |   |                                     |
| TITLE  |  | ☐ DELET <del>E</del>  | 517171.F                           |   | Change Addition                     |
| NAME   |  |   | 5.2 NAME                           |   |                                     |
| STREET ADDRESS   |  |   | 5.3 STREET ADDRESS                 |   |                                     |
| CITY-ST-ZIP  |  | T pourse  | 5.4 CITY - ST - ZIP                |   |                                     |
| TITLE  |  | DELETE  | 6.1 TITLE                          |   | ☐ Change ☐ Addition                 |
| NAME<br>CIRCLI ADDOCCO   |  |   | 6.2 NAME                           |   |                                     |
| STREET ADDRESS   |  |   | 6.3 STREET ADDRESS                 |   |                                     |
| CITY-ST-ZIP  | ov certify that the information supplied                                       | with this filing does not gua   | 6.4 DITY-\$1-ZIP                   | ed in Section 119.07(3)(i), Florida Statu   | ton I fighter again, that the       |

Information indicated on this annual report or supplemental annual report is true and accurrate 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 trustoe difference where the execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or on an attachment with a paddress.