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Profit Corporation Annual Report

1997



FLORIDA DEPARTMENT OF STATE

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Jan 15 1997 8:00am

Secretary of State

Addition

Channe

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000024522 (2)

IRON DRAGON, INC.

TITLE

NAME

STHEET ADDRESS

CITY-ST-ZIP

Principal Place of Business Mailing Address 3402 S DALE MABRY AVE #A 3402 S DALE MABRY AVE #A TAMPA FL 33629 TAMPA FL 33629-8600 3. Date Incorporated or Qualified 3a. Date of Last Report 03/25/1994 04/16/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3259795 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country $Z \cdot p$ Country 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes \text{Yes} \text{\text{\text{I}} No} 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CLEAR, RICHARD E 81 Name 3313 W PAUL AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) **TAMPA FL 33611** 83 84 City 85 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, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature type disciproblem and outlings less diagent and title if appenable (NOTE: Registered Agent signature required when re-ristating) DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (96/6)DELETE THEF 1.1 TITLE Change Addition CLEAR, RICHARD E NAME 1.2 NAME 3313 W PAUL AVENUE STREET ADDRESS 1.3 STREET ADDRESS **TAMPA FL 33611** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE ☐ Change Addition 2 2 NAME STREET ADDRESS 2 3 STREET ADDRESS 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADORESS 3 3 STREET ADDRESS CITY - ST - ZIP 34. CITY-ST-ZIP ☐ DELETE THILE Change Addition 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4 3 STREET ADDRESS CITY - ST - ZIF 4.4 CITY - ST - ZIP ☐ DELETE TITLE 51 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY- ST-ZIP 5.4 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.

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER & DIRECTOR.

Description 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, or on an attachment with an address.

61 THE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

DELETE