FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

| DOCUMENT | # P94 | 4000 | 0250 | 188 | (3) |
|-----------------|-------|------|------|-----|-----|

| Principal Place 3021 W WATE TAMPA FL 33 | ERS AVE | Maling Aodress 3021 W WATERS AVE TAMPA FL 33614 | | | | | | |
|---|--|---|--|---|--|---------------|---------------------------------------|-----------------------------|
| | | | | | 3. Date incorporated or Qualified 04/01/1994 | l l | of Last F 1/03/199 | ' |
| | lace of Business | 2a. Making Address | * | | 4. FEI Number | | · · · · · · · · · · · · · · · · · · · | Applied For |
| 21 | | 26 | | - | 59-3239706 | | \longrightarrow | Not Applicable |
| Suite, Apt. | #, etc | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | | | 5 Additional |
| City & State | | City & State | | | | | | Required |
| 23 | | 28 | | | 6. Election Campaign Financing Trust Fund Contribution | | | 0 May Be |
| Zip | Country | Ζφ | Country | | This corporation has liability for | intanoible ta | | d to Fees |
| 24 | 25 | 29 | 30 | | Florida Statutes Ye | B No | IX OLICEL 2 | 199.032, |
| | g. Name and Address of Currer | nt Registered Agent | | | 10. Name and Address of New | Registered | Agent | |
| DEIDED | 14.00p.1 | | 81 | Name | | | | |
| REIBER, | JACOB I WY 54TH W | | 82 | Street Addre | ess (P.O. Box Number is Not Accepta | ole) | | |
| | CHAPEL FL 33544 | | 83 | | | | | |
| WESLET | CHAPEL PL 33344 | | 63 | | | | | |
| | | | 84 | City. | | FL | 85 Z | p Code |
| SIGNATURE . | to the provisions of Sections 607,0502 ed agent, or both, in the State of Florith, and accept the obligations of, Sect Signal in light or pided has a frequencial agent. | os our tosco, mornia otanika | edd by the corpe S. Jil Boychead Agent | | | iointment as | registered | |
| 12. | OFFICERS AN | | 13. | | | | | |
| IIILE | | | 13. | | | ICERS AND | DIRECTO | DRS IN 12 |
| | D D | DELETE | 1 1 T-TEF | | ADDITIONS/CHANGES TO OFF | | DIRECTO Change | DRS IN 12 Addition |
| NAME Elect Apparei | REY, FRANK | DECETE | 1 1 THEF 12 NAME | | | | | PRS IN 12 Addition |
| STREET ADDRESS | REY, FRANK 817 S WESTSHORE BLVD | Decent Decent | 1 1 THEF 12 NAME 13 STREET | i | | | | OFIS IN 12 |
| STREET ADDRESS | REY, FRANK | | 1 1 THEF 1 2 NAME 1 3 STREET / 1 4 CHY-ST | i | | | Change | OFIS IN 12 ☐ Addition |
| STREET ADDRESS | REY, FRANK 817 S WESTSHORE BLVD | □ DECETE | 1 1 THEF 12 NAME 13 STREET / 14 CHY-ST 2 1 THEF | i | | | | |
| STREEF ADDRESS CITY - ST - Z P TILE | REY, FRANK 817 S WESTSHORE BLVD | | 1 1 THEF 12 NAME 13 STREET / 14 CHY-ST 2 1 THE 22 NAME | - ZiP | | | Change | PRS IN 12 Addition Addition |
| STREET ADDRESS CHY-ST-ZP TILE NAME | REY, FRANK 817 S WESTSHORE BLVD | | 1 1 1 1 LE 12 NAME 13 STREET / 14 CHY-ST 2 1 THLE 22 NAME 23 STREET / | -ZiP A008ESS | | | Change | PRS IN 12 Addition Addition |
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| STREET ADDRESS C-TY-ST-Z-P THLE SAME STREET ADDRESS C-TY-ST-Z-P THLE NAME STREET ADDRESS C-TY-ST-Z-P C-TY-ST-Z-P | REY, FRANK 817 S WESTSHORE BLVD | ☐ DELETE | 1 1 THE 12 NAME 13 STREET / 14 CHY - ST 2 1 THE 22 NAME 23 STREET / 24 C TY ST 3 1 FILE 32 NAME | - 74P 0.0058 5S - 7. P - 47 OHESS | | С | □ Change □ Change | |
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished does not qualify for the exemption stated in Section 119 97(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 cath; that I am an officer or director of this corporation or the receiver or I sustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 it examples.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SKINING OFFICER OR DIRECTOR REY, PRESIDENT