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

PROFIT

STREET ADDRESS

SIGNATURE: 1

14. Los hereby certify that the information supplied certify that the information indicated on this at earth, that I am an officer or director of the object appears in Block 12 or Block 13 if chariting, or

CITY-ST-ZIP



ELORIDA DEPARTMENT OF STATE

CORPORATION ANNUAL REPORT Secretary of State Division OF CORPORATIONS										
DOCUM		031859 (9))							
1. Corporation Na										
Principal Place of 10991 - 75 STF LARGO FL 346	REET	Mailing Address 10931 - 75 STREET LARGO FL 34647				1	d or Qualified	3a. Date o		port
2. Principal Place	e of Business	2a. Mailing Address				4. FEI Number 59-32848		<u> </u>	h	pplied For lot Applicable
Suite, Apt. #, (etc.	Suite, Apt #, etc.				5. Gertificate of Sta			\$8.75	Additional lequired
City & State		City & Stafe				6. Election Campai Trust Fund Cont	_		\$5.00	May Be
Zip 24	Country 25	28	Gount 30			8. This corporation Florida Statutes	has liability for	s ∏ No		199.032,
	9. Name and Address of Current	Registered Agent	8	1 Name		Name and Ado	iress of New 1	Registered A	jeni	
ENGLANDER, LEONARD S 5959 CENTRAL AVENUE SUITE 201 ST. PETERSBURG FL 33710				2 Street 3 City	t Address	Iress (P.O. Box Number is Not Acceptable)				
SIGNATURE	the provisions of Sections 607 0502 diagent, or both, in the State of Fiorid and accept the obligations of, Section instant Spectra problems of registered against	այրու մազդայան անաև - ՄՏ	ites, the above ized by the costs item Registered A 13.	produce produce				DATE FICERS AND	DIRECTO	
NAME STREET ADDRESS	ENGLANDER, LEONARD S 5959 CENTRAL AVENUE, SU ST. PETERSBURG FL 33710			ME EET ADORES! r-st-zip	38					
CITY-ST ZIP TITLE NAME STREET ADDRESS	P Stover, Brian A 14390 - 90th Avenue N.	DELETE	2 \ TIT 2 2 NAI 2 3 STE	LE ME EEL LADORES	Stor	rendent ICR, BRIAN LL Oaks C Linole, Fi	ene 1. 246	_	Change	☐ Addition
CITY - ST - ZIP TITLE NAME STREET ADDRESS	SEMINOLE FL	□ DELETE	3 : TH 32 NA 33 ST	ME REET ADORES	Fic	sident 12, Steven Solumbor II 100, FL. 3	sland#23		Change	⊠ Addition
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CITY - S1 - ZIP TITLE NAME STREET ADDRESS		☐ DELFIE	5 1 II 5 2 NA		55	,		[Change	Addition
CITY - ST - ZIP TITLE NAME		DELETE	54 C) 6 1 T) 62 N					[Change	Add tion

64 CiTY - ST ZP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE OR DIRECTOR

plies, with this filing is volumarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k), Florida Statutes. I further a same in the same legal effect as if made under sorrulation or the receiver or justee opinowered to execute this report as required by Chapter 607, Florida Statutes; and that my name d, or his an attachment with an additise. 4/30/96 (813)546-5865

CR2E034 (12/95)