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

PROFIT CORPORATION ANNUAL REPORT

1997

CITY-S1-ZIP

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

TITLE NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400036848 (7)

RODAK & ASSOCIATES, INC.

Principal Place of Business Mailing Address 711 - 58TH STREET SOUTH 711 - 58TH STREET SOUTH SUITE 7 SUITE 7 ST, PETERSBURG FL 33707-2552 ST. PETERSBURG FL 33707 3. Date Incorporated or Qualified 3a. Date of Last Report 02/09/1996 05/16/1994 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For M STREET S. 21711-58 MSTREET 5 59-3246149 Not Applicable \$8.75 Additional 5. Certificate of Status Desired SUITE Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees DINCHAS 8. This corporation has liability for intangible tax under s. 199.032, MINELLAS ママフムコ 33707 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RODAK, MICHAEL J 711 58TH ST. SOUTH Street Address (P.O. Box Number is Not Acceptable) SUITE 7 83 ST. PETERSBURG FL 33707 84 City 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: Typed or printed name of registered agent and title. Lapplicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)DELETE TillE 1.1 TITLE Change : ___ Addition RODAK, MICHAEL J NAME 1.2 NAME SUITE #5 711 58TH ST. SOUTH, SUITE 7 STREET ADDRESS 1.3 STREET ADDRESS ST. PETERSBURG FL 33707 CITY- ST-ZIP 1.4 CITY - ST - ZIP DELETE Addition 2.1 TITLE Change TITLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-\$1-79 2 4 CITY-ST-ZIP DELETE 31 TITLE Change Addition 111LF 3.2 NAME STREET ADORESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIF DELETE Change Addition UHLE 4.1 TITLE NAME 4, 2 NAME STREET ADDRESS 4.3 STREET AODRESS CHY-ST-ZIP 4.4 CITY - ST - ZIP DELETE 51 TITLE Change Addition THUE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS

5 4 CITY-ST-ZIP

6.4 CITY - ST - ZIP

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

61 TITLE

6.2 NAME 6.3 STREET ADDRESS

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

DELETE

FILED Jan 30 1997 8:00am Secretary of State

Change

Addition