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

Marian Address

PROFIT CORPORATION ANNUAL REPORT

1997

STREET ADDRESS

Lam an officer or director of the appears in Block 12 or Block

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Feb 05 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000061593 (7)

QUICKLAW LEGAL DOCUMENT SYSTEM, INC.

Principa: Plac	e or Business	Mailing Adoress				}		-	
3622 CENTRAL ST PETERSBUR		3622 CENTRAL AVE ST PETERSBURG FL 33711-1345							
						3. Date Incorporated or Qualified 06/18/1994		of Last R	eport
2. Principal P	Place of Business	2s. Mailing Address				4. FEI Number		Ar	oplied For
21		26			59-3276191				
Suite, Apt	#, elc	Suite, Apt. #, etc.			5. Certificate of Status Desired				
City & Stat	e	City & State			6. Election Campaign Financing \$5.00 May Be				
23		28			Trust Fund Contribution Added to Fees				
Zip	Country Zip		Country			8. This corporation has liability for intangible tax under s. 199.032,			
24	25	29	30					No	
	9, Name and Address of Curre	nt Registered Agent				10. Name and Address of New Re	gistered A	yent	
BABI	Boni, Michael J			81	Name				
	CENTRAL AVE			82	Street A	Address (P.O. Box Number is Not Acceptable)			
'ST P	PETERSBURG FL 33711			83					
				L				,	
				84	City		FL.		Code
11. Pursuant office or r agent I a	to the provisions of Sections 607.05 registered agent, or both, in the Statism familiar with, and accept the oblig	02 and 607.1508, Florida Sta e of Florida. Such change wa galions of, Section 607.0505,	itutes, the a as authorize Florida Sta	above ed by atute:	e-named of the corp s.	corporation submits this statement for the p oration's board of directors. I hereby accep	urpose of o t the appoi	hanging it ntment as	s registered registered
SIGNATURE.									
	Signature, typical or printed name of registered as				ent signature	equired when reinstating)	DATE	DIDECTO	20.151.40
12. T-TLE	D OFFICERS AF	ND DIRECTORS DELETE	13.		·	ADDITIONS/CHANGES TO OFFIC		Change	Addition
NAME	MCCUE, LEONARD A			1.1 TITLE 1.2 NAME			L.	" Curpuige	Mandan
	3622 CENTRAL AVE		1		ADDRESS				
STREET ADDRESS	ST PETERSBURG FL 33711				ADDRESS				
CIYY - S1 - 712 TITLE	D	DELETE		CITY - S	11-214			Change	Addition
NAME	BABBONI, MICHAEL J			2.2 NAME			_	Onlings	L. Addition
STREET ADDRESS	3622 CENTRAL AVE		2		ADDRESS				
CITY-ST-ZIP	ST PETERSBURG FL 33711			2. 4 CITY-ST-ZIP					
TITLE	0.10.000,00.000	DELETE			3) - £R		Ι	Change	Addition
NAME				3.2 NAME			-	_ ,	_
STREET ADDRESS			ı		ADDRESS				
CITY-ST-ZIP					ST-ZIP				
TITLE		DELETE	4.1 TITLE				Ţ	Change	Addition
NAME	1		4.2	NAME	:				
STREET ADDRESS			435	STREET	ADDRESS				
CITY - ST - ZIP				DITY-9					
TIT.E		DELETE		TITLE				Change	Addition
NAME	ì		521	NAME	- 1				
STREET ADDRESS			5.3 5	STREET	ADDRESS				
CUTY - \$1 - ZIP			5.4 (CITY-S	T - ZIP				
TITLE		☐ DELETE		TITLE				Change	Addition
MANG			621	NAME	1			•	

6.3 STREET ADDRESS 6.4 CITY - \$1 - 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 angual 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 Bloc

PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR