6-5-97 B-7755 C

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PROFIT CORPORATION ANNUAL REPORT

1997

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

FILED
Jun 05 1997 8:00am
Secretary of State

DOCUMENT # **P94000067687 (1)**

1. Corporate Name
MASTRY EXHIBITS, INC.

Principal Place of Business
2895 46TH AVE. NORTH
ST. PETERSBURG FL 33714

Mailing Address
2895 46TH AVE. NORTH
ST. PETERSBURG FL 33714-3811

3. Date Incorporated or Qualified: **09/12/1994**
3a. Date of Last Report: **04/22/1996**

4. FEI Number: **59-3301973** [ ] Applied For [ ] Not Applicable

5. Certificate of Status Desired [ ] **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] **$5.00** May Be Added to Fees

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 County 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 County 30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes. [ ] Yes [X] No

9. Name and Address of Current Registered Agent
MASTRY, CONTANTINE E
2895 46TH AVE. NORTH
ST. PETERSBURG FL 33714

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of s. 607.0505 and s. 607.0507, 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

12. OFFICERS AND DIRECTORS

TITLE	P	[ ] DELETE
NAME	MASTRY, CELMA	
STREET ADDRESS	950 PARK ST N	
CITY-ST-ZIP	ST PETERSBURG FL 33710	
TITLE	V	[ ] DELETE
NAME	MASTRY, RICHARD W	
STREET ADDRESS	2220 PINELLAS PARK DR S	
CITY-ST-ZIP	ST PETERSBURG FL 33712	
TITLE	ST	[ ] DELETE
NAME	MASTRY, ADIB A	
STREET ADDRESS	1281 79TH ST S	
CITY-ST-ZIP	ST PETERSBURG FL 33707	
TITLE	V	[ ] DELETE
NAME	MASTRY, CONSTANTINE E	
STREET ADDRESS	12430 81ST PL N	
CITY-ST-ZIP	SEMINOLE FL 34642	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	[ ] Change	[ ] Addition
12 NAME		
13 STREET ADDRESS		
14 CITY-ST-ZIP		
21 TITLE	[ ] Change	[ ] Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE	[ ] Change	[ ] Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE	[ ] Change	[ ] Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE	[ ] Change	[ ] Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE	[ ] Change	[ ] Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this form does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Further certify that the information indicated on the 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 is added, in Block 13 with a title.

SIGNATURE

C22E034 (9/96)