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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1	996	DIVISION OF CO	RPORATI	ONS				
DOCUN 1. Corporation	MENT # P9400 0	0074675 (7)						
THICK G	BUYS ENTERPRISES, INCO	DRPORATED				ABAN ABNI 1881 A		1881 BILL 1881
Principal Place	of Business	Mailing Address				OBIER OOMIN ISBUIT	JUNG BANG LU	JOD) BIII IBBI
1532 EDEN ISLE N.E.		1532 EDEN ISLE N.E.						
ST. PETERSBU		ST. PETERSBURG FL 3370	4					
					3. Date Incorporated or Qualified 10/11/1994	3a. Date o	f Last Rep 21/1995	
2. Principal Pla	ce of Business	2a. Mailing Address			4, FEI Number 59-1074163			pplied For
[21]		Suite, Apt. #, etc.			38-1074103			ot Applicable Additional
Suite, Apt. #	, etc.	27			5. Certificate of Status Desired		,	equired
City & State		City & Stale			6. Election Campaign Financing			May Be
23		28			Trust Fund Contribution			to Fees
Zip	Country 25	Z _{(P}	Counti	ry	This corporation has liability for Florida Statutes	intangibie tax	unoers	199.032,
24	g. Name and Address of Curre		1		10. Name and Address of New I		gent	
			8	1 Name				
PIPER, JAN J			8	2 Street Add	fress (P.O. Box Number is Not Acceptal	ble)		
	AVENUE NORTH		8					
ST PETERSBURG FL 33701			Ľ	<u> </u>				
			8	4 City		FL	85 Zip	Code
11. Pursuant te	o the provisions of Sections 607.050	2 and 607.1508, Florida Statutes,	the above	named corpo	oration submits this statement for the pu ard of directors. I hereby accept the app	rpose of chan	ging its re	gistered office
or registere familiar wit	ed agent, or both, in the State of Flor h, and accept the obligations of, Sec	ida. Such change was authorized tion 607.0505, Florida Statutes.	by the co	rporation's bo	ard of directors. I hereby accept the app	xomment as n	agistereo i	agent ram
SIGNATURE .						DATE		
	Signature, typical or printed namic of registered agen	it and the Lappicable (NOTE:	Registered A	gent signatura requi	red when reinstating) ADDITIONS/CHANGES TO OF		DIRECTOR	RS IN 12
12.	DP	DELETE	1. 1 TiTL	E			Change	Addition
NAME	SUGDEN, SCOTT		1.2 NAM	E				
STREET ADDRESS	1532 EDEN ISLE NE		13 STRE	ET ADDRESS				
CITY - S1 - ZIP	ST PETERSBURG FL 33704		_	- ST- ZIP			Change	Addition
TITLE	DV DATOION	DELETE	2. 1 7(7)			اسا	, Grange	☐ Mudition
NAME DAVE LABORES	PIPER, PATRICK 6675 BURNING TREE DR.		2 2 NAM	ET ADDRESS				
STREET ADDRESS CHY-ST-ZIP	SEMINOLE FL 34647			-ST-ZIP				
THE	OLIMITOLE 1 E 01011	☐ DELETE	3 1 TITE) Change	☐ Addition
NAME			3 2 NAM	ie				
STREET ADDRESS			3.3. STR	EET ADDRESS				
CITY - ST - ZIP		E DOLLTE		r-ST-ZIP] Change	Addition
TITLE		☐ DELETE	4. 1 111	ì		L) Outside	
NAME CLOSEL AGODDECS			4.2 NAS 4.3 S18	eet address				
STREET ADDRESS City-St-Zip				1-ST-ZIP				
11°LE		☐ DELETE	5 1 TIT			Ë] Change	Addition
NAME			5.2 NAM	AE				
STREET ADDRESS			5.3 STR	EET ADDRESS				
CITY-S1-ZIF		FIRE		Y-ST-ZIP			7 Change	Addition
TITLE		☐ DELETE	6 1 717			L	T cuantic	L.J Addition
NAME CAREAL ARROSCO			6.2 NAM	EET ADDRESS				
STREET ADDRESS CITY-S*-ZIP				Y-ST-ZIP				
UII 1 3 4P	1							

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(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 oatin; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 60?, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed in on an attachment with an address. <u> (813) 814-0333</u> SIGNATURE:

CR2E034 (12/95)