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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

DIVISION OF CORPORATIONS P94000074829 (0)

DOCUMENT #

1. Corporation Name

ANTIQUITY, INC.



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ncipal Place of Bu	usiness	Mailing Address						
916 SOUTH DALE		1916 SOUTH DALE MAB	RY					
TAMPA FL		TAMPA FL		3. Date incorporated or Qualified 10/12/1994 3a. Date of Last Repo			n	
					4. FEI Number			plied For
Principal Place o	f Business	2a. Mailing Address			59-3277347		No	t Applicable
		Suite, Apt #, etc.			5. Certificate of Status Desired		\$8.75 △	
Suite, Apt. #, etc	S.	27 Suite, Apr. #, etc.					Fee Re	
		City & State			6. Election Campaign Financing		\$5.00 Added t	-
City & State		28		~	Trust Fund Contribution 8. This corporation has liability for i			
Zip	Country	Zip	Countr	ry	R. This corporation has liability for I Florida Statutes	intangioie ti ∏No	ax unoci s	00.0011
	25	29	30		10. Name and Address of New R	Registered	Agent	
9	Name and Address of Current	Registered Agent	a	1 Name	10, 114			
					ress (P.O. Box Number is Not Acceptate	ole)		
LIVINGSTON	1, CLIFTON A		8	Street Addr	ress (P.O. Box Normber is Not Associate			<u> </u>
501 HORAT			8	33				
TAMPA FL 33606					65 Zip Code			
				City		FI	<u>- </u>	1 4 4 4 4 4 4 4
5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	provisions of Sections 607.0502	and 607.1508, Florida Statut	es, the abov	e named corpo	oration submits this statement for the purant of directors. I hereby accept the app	pointment a	s registered a	agent. I am
familiar with, a	and accept the obligations of Sect				. —			
SIGNATURE	nature typed or priched name of registers (lager)	and the dapple and the	OIL Registered A	Agrant signature requir	ad when resistance	FIGERS AN	ND DIRECTO	RS IN 12
	nature, typed or priched name of registrated ages OFFICERS AN	D DIRECTORS			ADDITIONS/CHANGES TO OF		DIRECTOR Change	RS IN 12
12.	OFFICERS AN	and taken application (b) D DIRE CTORS DELETE	1 1 III	TLE	ADDITIONS/CHANGLS TO OF		D DIRECTOR Change	AS IN 12 Addition
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In or supplemental annual report is true and accurate and that my signature shall have the same legal or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statu in attachment with an address