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

PROFIT



FLORIDA DEPARTMENT OF STATÉ

	DRPORATION NUAL REPORT 1996	Scoret	B Mortham ary of State CORPORATIONS		
DOCU 1. Corporati	JMENT # P9400	00077204 (3	)		
TARA	A-TRENT ENTERPRISES, INC	).			
,	ace of Business	Mailing Arthress			i 88171 99111 10811 18819 11811 08111 0781 1081
	ntral ave. Isburg fl 33707	7038B CENTRAL AVE. ST PETERSBURG FL.	33707		
				3. Date Incorporated or Qualified 10/20/1994	3a. Date of Last Report 03/06/1995
h 15	Place of Business	2a. Mailing Address		4. FEI Number 59-3281209	Applied For Not Applicable
	nt #. etc.	26		Certificate of Status Desired	\$8.75 Additional Fee Required
22 City & St	rate	Oity & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Ζιρ <b>24</b>	Country 25	Z(p)	Country 30		s 🔲 No
	9. Name and Address of Cur	ent Registered Agent	B1 Name	10. Name and Address of New	Registered Agent
	M, HOLGER D END AVE. NORTH		82 Street Ad	dress (P.O. Box Number is Not Accepta	able)
	FLOOR		83		
STPE	ETERSBURG FL 33701		84 City		FL 85 Zip Code
11. Parsaa or regi lad illar SiGNATUR	r with, and accept the conganions of S RE : Sparse tyes or profit sees to give ta	ection 607.0505, Florida Statuk	is iolic: Registered Agent signal incress.	red where rea of days	urpose of changing its registered office pointment as registered agent. I am  DATE FRICERS AND DIRECTORS IN 12
12.	I D	AND DIRECTORS  [] DELETE	13.	ADDITIONS CHANGES TO OF	Change Addition
NAME STREET ADDRE	LITTLE, ANTHONY A 7038B CENTRAL AVE.	-	1.2 NAME 1.3 STARF LABORESS		
TOLE	ST PETERSBURG FL 3370	/ DELETE	14 City - SF ZiP 2 1 Yift F		Change Addition
NAME STREET ADDRE	LITTLE, MELINDA M 7038B CENTRAL AVE.		2.2 NAM: 2.3 STREET ADDRESS		
7/15 - 51 - 216 Tulif	ST PETERSBURG FL 3370	CELETE	2.4 CP Y - ST - ZP 3.1 TITLE		☐ Change ☐ Addition
6306 816/11 4006	FARRELL, DOROTHY R.		3.2 NAME 3.3 STREET ADDRESS		
Sity - \$1 - 200	ST. PETERSBURG FL	3.4 C(TY, ST-ZIF)			
T TEE NAME		☐ DELETE	4 ° TITLE 42 NAME		☐ Change ☐ Addition
STREET ADOR	1885		4.3 STREET ADDRESS		
THEF		DETELE	4 4 CITY ST-ZIP 5 1 T-TLF 5 2 NAME		Change Addition
STREET ADDR	#SS		5.3 STREE* ACORESS		
CITY-ST ZH			54 CiTY ST-ZIP		Change Addition
THILE NAME		☐ DELETE	€ 1 TITLE € 2 NAMÉ		Change Addition
	207		6.3 STREET ADDRESS		

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). Fiorida 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 certify 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 Brock 12 or Block 13 if exampled, or on an attachment with an address.

6.4 CITY - S\* - ZIP

City Sti-Zin

SIGNATURE: SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/29/96 (813) 345-1846

CR2E034 (12/95)