

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

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Jan 23 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # **P94000086545 (8)**

1. Corporation Name
SASLONA BILLIARDS, INC.

Principal Place of Business
**10771 BEACH BOULEVARD #101
JACKSONVILLE FL 32246
US**

Mailing Address
**10771 BEACH BOULEVARD #101
JACKSONVILLE FL 32246-1841
US**

3. Date Incorporated or Qualified 11/28/1994	3a. Date of Last Report 03/01/1996
4. FEI Number 59-3278395	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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country

9. Name and Address of Current Registered Agent
**SASLONA, BRIAN
10771 BEACH BOULEVARD #101
JACKSONVILLE FL 32216**

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 Sections 607.0502 and 607.1508, 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

Sign name typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		
TITLE	PD	☐ DELETE
NAME	SASLONA, SHELDON D	
STREET ADDRESS	10771 BEACH BOULEVARD #101	
CITY-ST-ZIP	JACKSONVILLE FL 32216	
TITLE	VD	☐ DELETE
NAME	SASLONA, ELIZABETH	
STREET ADDRESS	10771 BEACH BOULEVARD #101	
CITY-ST-ZIP	JACKSONVILLE FL 32216	
TITLE	TD	☐ DELETE
NAME	SASLONA, BRIAN	
STREET ADDRESS	10771 BEACH BOULEVARD #101	
CITY-ST-ZIP	JACKSONVILLE FL 32216	
TITLE	SD	☐ DELETE
NAME	SASLONA, TERRI D	
STREET ADDRESS	10771 BEACH BOULEVARD #101	
CITY-ST-ZIP	JACKSONVILLE FL 32216	
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	
1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-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 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 on an attachment with an address.

SIGNATURE:

Brian Saslona Brian Saslona

1-18-97 904-641-7061

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0044384

CR2E034 (9/96)