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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000087007 (8)

GREAT SHOW FIREWORKS INC.

FILED May 15 1997 8:00am Secretary of State



Principa! Plac		Mailing /									
- 40347 US HWY - TARPON SPIRE			RNIER DR R FL 34677-4625			Ì					
: !		U\$					Date Incorporated or Q	ualified		te of Last F 9/1996	Report
2. Principal Place of Business 2a. Mailing Address							FEI Number	Applied For			
21 324 TAVERNIER DR 26							59-3290009				ot Applicable
Suite, Apt		27	, Apt. #, etc.			5.	Certificate of Status Det	sired		T	Additional lequired
1201	SMAR, FL	28	& State		· · · · · · · · · · · · · · · · · · ·		Election Campaign Fina Trust Fund Contribution	incing			May Be to Fees
Z _{ID} Country 24 34677 25 US 25			Zip Country			1	8. This corporation has liability for intangible tax under s. 199.032,				
24 346	9. Name and Address of Curre	29 ent Registered	Agent	[30]			Florida Statutes Name and Address of			No	
ppn		···· in Riginian		8	Name	 					
PRITCHARD, RANDY J 324 TAVERNIER DR					00						
OLDSMAR FL 34677				82		Address (P.	Address (P.O. Box Number is Not Acceptable)				
 				84	<u></u>					85 Zip	Code
									FL		
office or r agent La	to the provisions of Sections 607.05 registered agout, or both, in the Statum familiar with, and accept the obli-	602 and 607.150 le of Florida. Su gritions of Sect	08, Florida Statu ch change was ion 607.0505, Fj	tes, the abor authorized b prida Statute	ve-named by the cor es.	rporation's bo	oard of directors. I herel	by accept	the appo	ointment as	its registered s registered
SIGNATURE.	Signature of side of printed name of registered a			TE: Registered A	ent signatur	re required when r	reinstating)	4-30	DATE		
12.	T	ND DIRECTORS		13.		A	DDITIONS/CHANGES T	O OFFICI			
THE	D DANDY I		DELETE	1.1 TITLE						Change	Addition
NAME STREET ADDRESS	PRITCHARD, RANDY J -40347-US HWY-18 N #123			1.2 NAME	T ADORESS	30u	TAVER NIE	-R 1)		
City-St-7iP	-TARPON-SPIRNGS FL 34889			1.4 CiTY-		01.00	TAVERNIE MAR, FL 3	2467	ว		
IIILE	**************************************		DELETE	2.1 TITLE	31-ZIF	0003		7 (0 /	<i>.L</i>	Change	Addition
NAME				2.2 NAME						_ •	
STREET ADDRESS				2.3 STREI	T AODRESS						
Crty+St-ZIP				2.4 CITY	· ST- ZIP				e/ *		
1011.5	1/19 m		DELETE	3.1 TITLE						Change	Addition
NAME				3.2 NAME							
STREET ADDRESS				3 3 STREE	T ADDRESS						
CITY ST-ZIP				3 4. CITY					· ····		
THE			☐ DELETE	4.1 TITLE						Change	Addition
NAME				4.2 NAM	E						
STREET ADDRESS					T ADDRESS						
CITY - ST - ZIP			T 05: 5**	4.4 CITY-						10	
TITLE			DELETE	5.1 TITLE						☐ Change	Addition
NAME				5.2 NAME							
STREET ADDRESS					T ADDRESS						
E/TY+S1+ZiP			DELETE	5.4 CITY -						Change	Addition
THILE			☐ btrtit	6.1 TITLE						LI Unange	LI ADDITION
NAME	1			6.2 NAME		1					
1	ļ										
STREET ADORESS CITY: \$1-209					et address						

plemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name an attagment with an address.

814-949