

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000000317 (4)

1. Corporation Name

PURI SAKANA OF DESTIN INC.



Principal Place of Business

Mailing Address

Sumner

22 MORENO POINT ROAD, #13
DESTIN FL 32541

P.O. BOX 786
DESTIN FL 32540
US

3. Date Incorporated or Qualified

12/30/1994

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 505 Vera Cruz Dr

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 DESTIN, FL

28

24 Zip

Country

29 Zip

Country

32541

25 Okaloosa

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MRAZ, CELIA G

22 MORENO POINT ROAD, #13
DESTIN FL 32541

Address

Change

81 Name

MRAZ CELIA G

82 Street Address (P.O. Box Number is Not Acceptable)

505 Vera Cruz Drive

83

84 City

DESTIN

FL

85 Zip Code

32541

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

Signature, typed or printed name of registered agent and office if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME MRAZ, CELIA G *Address change.*
STREET ADDRESS 22 MORENO POINT ROAD, #13
CITY-ST-ZIP DESTIN FL 32541

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

Mc Charles L Mraz
505 Vera Cruz Dr
Destin, FL 32541-3015

TITLE D ☐ DELETE
NAME MRAZ, CHARLES L
STREET ADDRESS 22 MORENO POINT ROAD, #13 *Address change.*
CITY-ST-ZIP DESTIN FL

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

Mr Charles L Mraz
505 Vera Cruz Dr
Destin, FL 32541-3015

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
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 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Celia G. Mraz

04/14/96

837-4890

CR2E034 (12/95)