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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

P95000005339 (3) DOCUMENT

RETAIL	PRO	IFCT	MANAGEMENT	. INC.
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Principal Place of Business Mailing Address 6678 FIRST AVE S 6678 FIRST AVE S ST PETERSBURG FL 33707 ST PETERSBURG FL 33707 3. Date Incorporated or Qualified 3a. Date of Last Report 01/20/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees 23 28 Trust Fund Contribution 8. This corporation has lability for intangible tax under s. 199.032, Country Zin Country Źφ X Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MILLS, BERNY M R2 Street Address (P.O. Box Number is Not Acceptable) 6678 FIRST AVE S ST PETERSBURG FL 33707 63 84 Zip Code Crtv 85 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or product mone of registered agent a in too if application (12/95)OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13 Add tion DELETE TITLE D BUDD, BOB CR2E034 1.2 NAME NAME 6678 FIRST AVE S 1.3 STREET ADDRESS STREET ADDRESS ST PETERSBURG FL 33707 CITY-ST ZIP 1.4 CITY - \$1 - ZIP DELETE 2.13016 Change Addition TITLE FLECK, MIKE NAME 2.2 NAME 6678 FIRST AVE S STREET ADDRESS 2.3 STREET ADDRESS ST PETERSBURG FL 33707 2.4 CHY-ST ZIP CITY-S!-Z-P TT DELETE DIP Change Addition TITLE 3.1 bill E SCOTT LITTLE AVE S NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS ST PETERSBURG, FL 33707 CITY - ST - ZIP 34 CITY - ST - ZiP ☐ Change □ DELETE DISIT Addition 1 4 1 TITLE TITLE MILLS, BERNY M 6678 FIRST AVE S MAME 4.2 NAME STREET ADDRESS 4.3 STHEFT ADDRESS PETERS BURG, FL 33707 CITY-SI-ZIP 4.4 CITY - ST- ZIP Change DELETE Addition TITLE 5 1 THILE NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS 5 4 CITY - ST - ZIP CITY - ST - ZIP Addition TITLE DELETE Change 6 1 TITLE STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY ST-ZIP 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 his 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 occiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block

SIGNATURE:

SIGNING OFFICER OR DIRECTOR

4-30-96 343-9578