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FILED
May 14 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 # P95000014744 (3)

1. Corporation Name
GEORGE W. FIKA, INC.

Principal Place of Business
6630 20TH ST.
VERO BEACH FL 32966

Mailing Address
6630 20TH ST.
VERO BEACH FL 32966-7853



3. Date Incorporated or Qualified
02/20/1995

3a. Date of Last Report
07/23/1996

4. FEI Number
65-0563127

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 Country

28 Zip Country

24

29 30

9. Name and Address of Current Registered Agent

FIKA, GEORGE W
6630 20TH ST.
VERO BEACH FL 32966

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when changing.) DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
11 TITLE	FIKA, GEORGE W	6630 20TH ST.	VERO BEACH FL 32966	11 TITLE DIRECTOR
12 NAME				12 NAME MARCIA O'DONAL
13 STREET ADDRESS				13 STREET ADDRESS 6630 20TH ST
14 CITY - ST - ZIP				14 CITY - ST - ZIP VERO, FLA 32966
21 TITLE				21 TITLE
22 NAME				22 NAME
23 STREET ADDRESS				23 STREET ADDRESS
24 CITY - ST - ZIP				24 CITY - ST - ZIP
31 TITLE				31 TITLE
32 NAME				32 NAME
33 STREET ADDRESS				33 STREET ADDRESS
34 CITY - ST - ZIP				34 CITY - ST - ZIP
41 TITLE				41 TITLE
42 NAME				42 NAME
43 STREET ADDRESS				43 STREET ADDRESS
44 CITY - ST - ZIP				44 CITY - ST - ZIP
51 TITLE				51 TITLE
52 NAME				52 NAME
53 STREET ADDRESS				53 STREET ADDRESS
54 CITY - ST - ZIP				54 CITY - ST - ZIP
61 TITLE				61 TITLE
62 NAME				62 NAME
63 STREET ADDRESS				63 STREET ADDRESS
64 CITY - ST - ZIP				64 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: SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)