

ANNUAL REPORT  
1997



Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

Sep 26 1997 8:00am  
Secretary of State

DOCUMENT # P95000024344 (0)  
7972 CORPORATION

Principal Place of Business  
124 131ST AVENUE E  
MADEIRA BEACH FL 33708

Mailing Address  
124 131ST AVENUE E  
MADEIRA BEACH FL 33708-2622

2. Principal Place of Business  
21 Suite, Apt. #, etc.  
22 City & State  
23 Zip  
24 Country

2a. Mailing Address  
26 Suite, Apt. #, etc.  
27 City & State  
28 Zip  
29 Country

3. Date incorporated or Qualified  
03/27/1995  
3a. Date of Report  
06/17/1996  
4. FEI Number  
APPLIED FOR 59-3304825  
5. Certificate of Status Desired  
\$8.75 Additional Fee Required  
6. Election Campaign Financing  
Trust Fund Contribution  
\$5.00 May Be Added to Fees  
7. This corporation has liability for intangible tax under 199-032 Florida Statutes

8. Name and Address of Current Registered Agent

HOUSTON, WILLIAM R  
124 131ST AVENUE E.  
MADEIRA BEACH FL 33708

10. Name and Address of New Registered Agent

81 Name  
LARRY JONES  
82 Street Address (P.O. Box Number is Not Acceptable)  
4201 W. TAMPA BAY BLVD  
83  
84 City  
TAMPA FL 33614

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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, and I, the undersigned, am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE LARRY JONES LARRY JONES 7/18/97

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when removing)

12. OFFICERS AND DIRECTORS

|                |                        |        |
|----------------|------------------------|--------|
| TITLE          | P                      | DELETE |
| NAME           | MOROZ, KENNETH         |        |
| STREET ADDRESS | 124 131ST AVENUE E     |        |
| CITY- ST- ZIP  | MADEIRA BEACH FL 33614 |        |
| TITLE          | S                      | DELETE |
| NAME           | JONES, LARRY           |        |
| STREET ADDRESS | 4201 W. TAMPA BAY BLVD |        |
| CITY- ST- ZIP  | TAMPA FL 33614         |        |
| TITLE          |                        | DELETE |
| NAME           |                        |        |
| STREET ADDRESS |                        |        |
| CITY- ST- ZIP  |                        |        |
| 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  |  |        |          |

000002305630  
-09/29/97--01004--031  
\*\*\*550.00

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f) 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 the signature of the person who is 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: LARRY JONES  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/18/97

9-26  
JP  
0076800

LARRY JONES

7/18/97