SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

ANNUAL REPORT Sec				ARTMENT C B Morthar tary of State CORPORA	n e, 🗸	•			
DOCUM 1. Corporation I SOD BY	MENT # P950 BALOGH, INC.	00027	298 (5))			<u>. 1881/68) 184 1807 BUU BAND BUU B</u>		
Principal Place	of Business	Mailing	Address				T 100 (COO) FRE LUMBE DIVIN BRIDE QUANT		
8751 RIDGE RO NEW PORT RIC	DAD Hery Fl 34654		8751 RIDGE ROAD NEW PORT RICHERY FL 34654						
							3. Date Incorporated or Qualified 04/05/1995	3a. Date of Last Report	
2. Principal Plai	ce of Business	⊢ —	2a. Mailing Address				4. FEI Number \$9-38//3/6	Applied Fo	
Suite Apt. #,	etc		26 Suite, Apt #, etc 27				5. Certificate of Status Desired	\$8.75 Additiona Fee Required	
City & State		¬ ´	& State		··· = •		6. Election Campaign Financing	\$5.00 May Be	
Zip Country 25		28 7:p			Country		Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s 199 032 Florida Statutes Yes No		
	9. Name and Address of C		Agent		,		10. Name and Address of New Re	gistered Agent	
CORPORATION INFORMATION SERVICES INC. 1201 HAYS STREET TALLAHASSEE FL 32301					81 82 83	Street Ado	ess (P.O. Box Number is Not Acceptable)		
•					84	City		FL 85 Zip Code	
office or reg agent I am	the provisions of Sections 60 jistered agent, or both, in the familiar with, and accept the i	7 0502 and 607.15 State of Florida Scobligations of Sec	08, Florida Statu ich change was tion 607,0505, Fl	ites, the ab- authorized lorida Statu	ove- by t	named corp he corporat	poration submits this statement for the p con's board of directors. I hereby accep	urpose of changing its registere tithe appointment as registered	
SIGNATURE SI	lgeafure. I _f pedroi proced nacle of registe	ed abent and steld accid	ialse (Ñr.))TE Hugistined	Aarr	r' signature reco	ireo when re ristating)	[JATE	
12.		S AND DIRECTOR		13.		g raccora racqui	ADDITIONS/CHANGES TO OFFIC		
TITLE	P		DELETE	11 1	LE	7		Change Add	
NAME	BALOGH, FRANK		•	1 2 NA	1 2 NAME				
STREET ADDRESS 8751 RIDGE ROAD				1.3 STREET ADDRESS		ADORESS			

Date Incorporated or Qualified 04/05/1995	3a. Date	of Las	st Repor	l	
El Number		L.	Applied	1 For	j
59-33/13/6			Not Ap	plicable	
Certificate of Status Desired		•	5 Addit Require		
Election Campaign Financing Trust Fund Contribution			00 May led to Fe		
This corporation has liability for in	ntang:ble tax	unde	ers 199	.032,	1
Florida Statutes	Yes 🔀 🛚	No			
Name and Address of New Reg	istered Age	nt			
D. Box Number is Not Acceptable					1
	/]
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		85 2	Zip Code	,	┨
	FL	٠ ١	- Q - Q - Q - Q - Q - Q - Q - Q	,	
submits this statement for the purard of directors. I hereby accept t	rpose of cha the appointn	inging nent a	j its regis is registe	stered ered	
nstating)	DATE				1
DDITIONS/CHANGES TO OFFICE	ERS AND D	RECT	ORS IN	12	ହା
		Chan	ge	Addition	CR2E034 (3/96)
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		Chan		Addisor	
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		Chan	ge	Addition	

TITLE	VST	DELETE	2 1 TITLE	Change Add	dition
NAME	Balogh, Michaelle		2 2 NAME		
STREET ADDRESS	8751 RIDGE ROAD		2 3 STHEET ADDRESS		
CITY - ST - ZIP	NEW PORT RICHEY FL 34654		2 4 CITY-ST-ZIP		
HILE		DELETE	31 THUF	Change Add	d-tion
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP			3.4 City-\$t-ZIP		
TITLE		DELETE	4 1 TITLE	Change Add	dition
NAME			4 2 NAME		
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CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5 1 TITLE	Change Add	dition
NAME			5.2 NAME	400001913884 -08/06/9601108018	
STREET ADDRESS			5.3 STREET ADDRESS		
CrTY - ST - ZiP			5.4 CITY - ST - ZIP		
TITLE		DELETE	61 TITLE	Change Adv	dition
NAME			6.2 NAME	O DC	
STREET ADDRESS			6 3 STREET ADDRESS	U	
City -ST - ZIP			6.4 CiTY - \$T - ZiP		
 14. I do hereb 	by certify that the information supplied with this fill	ng is voluntarily furnis	shed and does not	t qualify for the exemption stated in Section 119 07(3)(k), Florida Statutes T	

14 CiTY - ST - ZIP

SIGNATURE:

CHTY - ST - ZiP

TITLE

NEW PORT RICHEY FL 34654

I do hereby certify that the information supplied with this filing is voluntarily furnished and toos 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 it made under oath, that I am an officer or director of the corporation or the receiver or trust it empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in B poyliz or true 13 if changed, or or an attachment with an address.

GNATURE:

| Continued to the information indicated on this filing is voluntarily furnished and toos in the information indicated on this filing is voluntarily furnished and toos in the information indicated on this filing is voluntarily furnished and too in the information indicated on this filing is voluntarily furnished and the same legal effect as it made under oath, that I am an officer or director of the corporation or the receiver or trust it empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in B poyling in the same legal effect as it made under oath, that I am an officer or director of the corporation or the receiver or trust it empowered to execute this report as required by Chapter 617, Florida Statutes I are the same legal effect as it made under oath, that I am an officer or director of the corporation or the receiver or trust is report and accurate and that my signature shall have the same legal effect as it made under oath that my signature shall have the same legal effect as it made under oath that my signature shall have the same legal effect as it made under oath that my signature shall have the same legal effect as it made under oath that my signature shall have the same legal effect as it made under oath that my signature shall have the same legal effect as it made under oath that my signature shall have the same le

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