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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DOCUM  1. Corporation N		00029258 (	7)	ONS			
Principal Place of Business 3223 W. PRICE AVE. TAMPA FL 33611		Maing Address 3223 W. PRICE AVE. TAMPA FL 33611				II 80H 00H II	818 18110 11891 Atlat 1911 1991
IAMPA PE 330	"	17mm 77 1 2 3 3 3 1 1			Date Incorporated or Qualified     04/10/1995	3a. Dat	e of Last Report
2. Principal Plac	e of Business	2a. Mailing Address			x4. fEl Number		Applied For
Suite, Apt. #,	etc.	Suite, Apt. #, etc			59-332874 5. Certificate of Status Desired	<b>/</b>	Not Applicable \$8.75 Additional Fee Required
City & State		City & State			6. Election Campaign Financing		<b>\$5.00</b> May Be
<b>Z</b> ip	Country	<b>28</b>	Count		Trust Fund Contribution     This corporation has liability for		Added to Fees tax under s. 199.032.
24	25 Suran of Curr	29	30		Florida Statutes 10. Name and Address of New		Agent
	9. Name and Address of Curi	rent Registered Agent	8	1 Name	10.	<b>.</b>	
BALDWIN, RICHARD T				2 Street Add	reas (P.O. Box Number is Not Accept	able)	
3223 W.	PRICE AVE.						
TAMPA F	L 33611		8	3			
			Ε	4 City		FI	85 Zip Code
CIONIATUDE	registered agent, or both in the statutes of Section 607.05.05, Florida Statutes inliar with, and accept the obligations of, Section 607.05.05, Florida Statutes  TURE  Signature hand or procedures to the desiration of the Section 607.05.05 and the Statutes of the Section 607.05.05 and the Section 607.05 and the Secti			gert signat er rægut	ADDITIONS CHANGES TO O	DATE EFICERS AN	NO DIRECTORS IN 12
NAME STREET ADDRESS	BALDWIN, RICHARD T 3223 W. PRICE AVE.			NE EN LADIOGESS			
CITY-ST-ZIP	TAMPA FL 33611		14 CIF 2 1 Ti!	r S1-7IF			Change Addition
TITLE		П жи	2 2 NAM	1			
NAME STREET ADDRESS			23816	SET ADDRESS			
CITY-ST-ZIP			2 4 CIT	Y-ST-ZIP			Change Addit on
TITLE		DELFTE	3 1 7 1	l l			C Change C Xoon on
NAME			32 NAI 33 SI	ME HEEL ADDRESS			
STREET ADDRESS				Y - S1 - ZIF			
CITY-ST-ZIP TITLE		DEFFIE	4 1 11	Lf			☐ Change ☐ Addition
NAME			4.2 NA				
STREET ADDRESS				RELI ADDRESS			
CITY-ST-ZIP		DELETE		1 - S1 - ZIP			Change Addition
THILE		Dittele	5 2 NA				
NAME STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP				Y - ST - ZIP			
TITLE		DELETE	6 1 TI	ri E			Change Addition
NAMÉ			6 ? NA	ME			
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP		P. J. M. A. J. P.		ry St - ZIP	to the exemption stated in Section	119.07(3)(k)	Florida Statutes. I further
SIREET ADDRESS  CITY-SI-ZIP  14. I do hereb certify that	by certify that the information support it the information indicated on this fam an officer or director of the c n Block 12 or Block 13 if changed	ammuse region. Or suppliements	640) y furnished and oll annual report in trusted empower	ry-St-ZiP does not qualify	y for the exemption stated in Section trate and that my signature shall have this report as required by Chapter 607	119.07(3)(k), the same le 7, Florida Sta	Florida Statutes. I fig gal effect as if made itutes, and that my i

SIGNATURE: Audul J. Baldin Lichard T. Baldwin 5-12-96 813-839-8516