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PROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

P95000034351 (3)

1. Corporation Name

	'N SNAP, INC.									
Principal Place	e of Business	Mailing Addres	s						î Firmî ilk	
	STREET SOUTH BURG FL 33707		TREET SOUTH URG FL 33707							
						3. Date incorporated 04/27/1995	or Qualified	3a. Date	of Last F	leport
21 280	tace of Business 4 54 Th AVE Sove	2a. Mailing Add				4. FEI Number 59 831	2628	/		Applied For Not Applicable
Suite, Apt.		Suite, Apt. :				5. Certificate of State	s Desired			Additional Required
City & State 23 Zip	PENELSBURG FL	City & State				6. Election Campaign Trust Fund Contrit	~			0 May Be d to Fees
24 337	9. Name and Address of Curi	Zip Zip zent Registered Agest	30	untry		This corporation h Florida Statutes	☐ Yes	No No		199.032,
	5. Name and reduces of Con	rent negistered Agent		81 N	lame	10. Name and Addre	88 of New R	egistered A	gent	-
BAKER,	MARY ANN									
	VRK STREET SOUTH			82 S	treet Addre	ess (P.O. Box Number is	Not Acceptable	le)		
ST PETE	ersburg fl 33707			83			· ,			
				84 C	ity				85 Zn	p Code
11. Pursuant t	to the provisions of Souther 607.06	00 ppd 607 1608 Flavia	I- 02-1	1 1	-			FL	1 I '	
	to the provisions of degacins out, oc	JUZ AND DUT, TOUG, FIDRIC			ied corpora	ation submits this stateme	ant for the pur	pose of char	nging its r	egistered office
or register	red agent, or both, in the State of File	orida. Such change was	authorized by the	corporat	tion's bear	d of directors. I hereby ac	cept the appo	intrient as r	egistered	agent. Lam
or register familiar wit	to the provisions of Sections 607.05 red agent, or both, in the State of Fi th, and accept the obligations of, Se	orida. Such change was ection 607.0505. Forida	authorized by the statutes.	corporat	tion's board	d of directors. I hereby ac				
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SIGNATURE _	Signature, typed or printer harbe of physicereplac OFFICERS A	ent and title applicable AND DIRECTORS	(NOTE: Registered			when reinstating!		04-/.	5-96	-
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oath; that it am an officer or director of the corporation or the acceiver 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 changing, or on an attackment with an address.

Tresilent 8/3 865 6222