## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1997 DOCUMENT # P95000041196 (3)

COMING ATTRACTIONS GRIP & ELECTRIC, INC. Principal Place of Business Mailing Address 567 BISHOPGATE LN 567 BISHOPGATE LN JACKSONVILLE FL 32204-4135 JACKSONVILLE FL 32204 3. Date Incorporated or Qualified 3a. Date of Last Report 05/18/1995 04/18/1996 2. Principa: Place of Business 2a. Mailing Address 4 FEI Number Applied For 59-3318867 21 26 Not Applicable Suito, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, 30 Yes No 25 29 Florida Statutes 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent B1 Name BARTH, CHARLES U 567 BISHOPGATE LN 82 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32204 Zip Code 84 City 85 11. Pursuant to the provisions of Sections £07 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered off se 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 5. p. 5.0. Appert or protective is of registered agent and title it applicable. (NOTE Registered Agent signature required when rainstating OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. (96/6) DELETE Change Addition TITLE 1.1 TITLE WHEATLEY, THOMAS 1.2 NAME 14555 STACEY ROAD 1.3 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 1.4 CITY - ST - ZIP 01x 51-73 DELETE Change Addition 21 TITLE 111, F JAEGER, THOMAS 2.2 NAME 752 CAMERON DRIVE 2.3 STREET ADDRESS SUREET ADDRESS **ORANGE PARK FL** 2 4 City-St-ZiP CHI S. ZIP DELETE Change Addition THE 3.1 TITLE BARTH, CHARLES NAME 3.2 NAME 3427 OAK STREET STREET ADDRESS **3.3 STREET ADDRESS** JACKSONVILLE FL 3.4 CITY-ST-ZIP CHY-\$1-70 DELETE 4.1 TITLE Change Addition THU 4 2 NAME NAME SHELL APORESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CHY 51-ZE DELETE Change Addition 51 TITLE Tille NAME. 52 NAME 5.3 STREET ADDRESS STREET MEASON 5.4 CITY-ST-ZIP CHY SHAP DELETE Change \_\_\_ Addition 101.4 6.1 TITLE 6.2 NAME NAM 63 STREET ADDRESS SERFEL AUDRESS

6.4 CITY - ST - ZIP

SIGNATURE:

CITY ST-76:

14. If do hereby certify that the information suppored with the information indicated on this armulal report or supplementary or director of the comparant or the comparant of the c

Lam an officer or director of the corp appears in Block 12 or Block 13 if of

Tis true and accurate and that my signature shall have the same legal effect as if made under oath; that appeared be execute this post as required by Chapter 607, Florida Statutes; and that my name

for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the

**FILED** 

Apr 11 1997 8:00am

Secretary of State