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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

FILED Jan 30 1997 8:00am Secretary of State

POCUMENT # P95000056610 (5)

MESA SWAP MEET, INC. Principal Place of Business Mailing Address 2001 E IRLO BRONSON HWY 111 N ORANGE AVE KISSIMMEE FL 34744 SUITE 800 ORLANDO FL 32801-2373 US 3. Date Incorporated or Qualified 3a. Date of Last Report 03/12/1996 07/21/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 2801 E. INO BROWSON HOW 59-3335391 APPLIED FOR Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State ity & State 6. Election Campaign Financing \$5.00 May Be ssimmee Trust Fund Contribution 23 28 Added to Fees $Z_{\rm IP}$ Country 8. This corporation has liability for intangible tax under s. 199.032, OSCEOIA No. 25 Florida Statutes Yes Yes 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name BUONAURO, JR. FRANK A. 2801 E. IRLO BRONSON HWY 82 Street Address (P.O. Box Number is Not Acceptable) KISSIMMEE FL 34744 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Significe, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS (96/6) 13. DELETE ☐ Change Addition TITLE 1.1 TITLE BUONAURO, JUDITH V NAME 1.2 NAME 2801 E IRLO BRONSON HWY STREET ADDRESS 1.3 STREET ADDRESS KISSIMMEE FL 34744 1.4 CITY-ST-ZIP City - ST - ZIP TITLE DELETE 2.1 TITLE Change Addition BUONAURO, FRANK A. NAME 2.2 NAME 2801 E IRLO BRONSON HWY STREET ADDRESS 2.3 STREET ADDRESS KISSIMMEE FL 2 4 CITY-ST-7(P CITY-ST-ZIP DELETE ☐ Change ... Addition 31 TITLE TITLE 32 NAME NAME 3.3 STREET ADDRESS STREET ADORESS 3.4. C(TY-ST-Z)P CITY - ST - ZIP DELETE Change Addition 4.1 TITLE TITLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

6.4 CITY-ST-ZIP 14. How hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this a inual report or supplied ental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of metographic proporation or tips receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

appears in Block 12 or

CITY - ST - ZIP