

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000067404 (0)

1. Corporation Name

MISCELLANEOUS INC.



Principal Place of Business

326 PINEAPPLE STREET
TARPON SPRINGS FL 34689

Mailing Address

326 PINEAPPLE STREET
TARPON SPRINGS FL 34689

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

08/31/1995

3a. Date of Last Report

4. FEI Number

59-3331723

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 193.032
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

SEALS N' SIGNATURE/JOANNE SIRISKA
6822 22ND AVENUE NORTH
SUITE 277
ST. PETERSBURG FL 33710

10. Name and Address of New Registered Agent

81 Name

SARAH PARRISH

82 Street Address (P.O. Box Number is Not Acceptable)

326 PINEAPPLE STREET

83

84 City

TARPON SPRINGS FL

85 Zip Code

34689

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 obligation of, Sections 607.0505, Florida Statutes.

SIGNATURE

Sarah Parrish

SARAH PARRISH

4/22/96

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	SARAH PARRISH - President	☐ Change ☒ Addition
1.2 NAME	326 PINEAPPLE STREET	
1.3 STREET ADDRESS	TARPON SPRINGS, FL 34689	
1.4 CITY - ST - ZIP		
2.1 TITLE	VICE - PRESIDENT	☐ Change ☒ Addition
2.2 NAME	MICHAEL PARRISH	
2.3 STREET ADDRESS	326 PINEAPPLE STREET	
2.4 CITY - ST - ZIP	TARPON SPRINGS, FL 34689	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE	700001840517	☐ Change ☐ Addition
5.2 NAME	-05/28/96--01028--001	
5.3 STREET ADDRESS	***200.00	
5.4 CITY - ST - ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does 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 if made under oath, that I am an officer or director of the corporation or the receiver 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 changed, or on an attachment with an address.

SIGNATURE: *Sarah Parrish* SARAH PARRISH
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/96 937-3418

CR2E034 (12/95)