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

PROFIT CORPORATION ANNUAL REPORT



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

1996

Principal Place of Business

SIGNATURE:

DOCUMENT # P95000067904 (9)
1. Corporation Name

Mailing Address

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER

THACCOC	ENTERPRISES	INC
ITRADOUG	ENTERPRISES	. INU.

1453 COTTON DUNEDIN FL		1453 COTTONWOOD TER DUNEDIN FL 34698	R.				
						3. Date Incorporated or Qualified 3a. Date of Last Report 09/01/1995	
2. Principal Pla	ice of Business	2a. Mailing Address				4. FEI Number Applied For	
21		26		~		59~3334468 Not Applicable	
Suite, Ant. #	*, etc.	Suite, Apt #, etc.				5. Certificate of Status Desired Sa.75 Additional Fee Required	
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees	
Zip	Country	Zip	Cour	ntry		8. This corporation has liability for intangible tax under s. 199.032,	
24	25		30			Florida Statutes 🔀 Yes 🗌 No	
	9. Name and Address of Current	Registered Agent		81	Name	10. Name and Address of New Registered Agent	
05,407	OO OVELLOS		[۱"			
SEVASTOS, STELIOS 1453 COTTONWOOD TER.		[82	Street A	Address (P.O. Box Number is Not Acceptable)		
	N FL 34698		-	83			
				84	City	El 85 Zip Code	
11 Purement to	o the provisions of Sections 607 0502	and 607 1508. Florida Statutes	the above	/e·n	amed co	corporation submits this statement for the number of changing its registered office.	
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. Fam familiar with, and accept the obligators of, Section 607.0505, Florida Statutes. SIGNATURE							
12.	Signature, types or printed name of registered agents OFFICERS AND		. Brighteel / 13.	Age: 1	l signatura re	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP OFFICERS AND	DELETE	1 1 11] L F		Change Addition	
NAME	SEVASTOS, STELIOS		1.2 NAI				
STREET ADDRESS	1453 COTTONWOOD TER.				ACORESS		
CITY-ST-ZIP	DUNEDIN FL 34698		1.4 CIT				
TITLE	DS	DELETE	2 1 111			Change Addition	
NAME	SEVASTOS, CHRISTOS		2 2 NAI	ME			
STREET ADDRESS	23 HILLCREST AVE.		2 3 S*F	REET.	ADDRESS		
CITY-ST-ZIP	CLEARWATER FL 34625		2.4 CIT	Y-S1	1 - 21F		
TITLE		☐ DELETE	3 1 11	lιF		Change Addition	
NAME			3.2 NA	ΝĿ			
STREET ADDRESS			33 S*	REET	ADDRESS		
CITY-ST-ZIP			3.4 CIT	Y-\$1	t - <i>Z</i> (P	New Control of the Co	
TITLE		☐ DELETE	4 1 TI	ILE.		Change Addition	
NAME			4.2 NA	Μŝ			
STREET ADORESS			43 ST	REFT	ADDRESS		
CITY - ST - ZIP		——————————————————————————————————————	44 C I		T - ZIP		
TITLE		☐ DELETE	5 1 10			Change Addition	
NAME			5 2 NA				
STREET ADORESS					ADDRESS		
CITY - ST - ZIP		□ DELETE	5 4 CII		T - 74P	Change Addition	
TITLE		[] DELETE	6 1 Til			Li cuange Li Addition	
NAME			62 NA		Annaree		
STREET ADDRESS			6.4 CH		ADDRESS T. 719		
CITY-ST-ZIP 14. Ldo hereb	Locatify that the information supplied v	with this filing is voluntarily furnis				Lairly for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further	
certify that oath; that	the information indicated on this annu	ial report or supplemental annu- ration or the receiver or trustee	at report is empower	s tru	ie and ac	accurate and that my signature shall have the same legal effect as if made under ute this report as required by Chapter 607, Florida Statutes; and that my name	

President Stelios Sevastos