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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 30 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000068020 (3)

POL-DORA CORPORATION

Lam an officer or director of the appears in Block 12 or Block 1.

SIGNATURE:

Principal Place of Business

8800 49TH STREET NORTH SUITE 406-5 PINELLAS PARK FL 34666		8800 49TH STREET NORTH SUITE 408-5 PINELLAS PARK FL 33782-5344		3. Date Incorporated or Qualified 08/31/1995	3a. Date of Last R 05/01/1996	eport	
2 Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		plied For
21	000 0. 1700000	26			59-3333845		t Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.			\$8.75	Additional
22	,	27	27		5. Certificate of Status Desired	Fee Re	
City & State)	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	☐ Added	
Zφ	Country	Zip	Count	У	8. This corporation has liability for	intangible tax under s	. 199.032,
24	25	29	30			Yes No	
	9. Name and Address of Cu	rrent Registered Agent		.,	10. Name and Address of New Re	gistere# Agent	
ZABO	OLOTNY, STEVE		8	1 Name			
8800 49TH STREET NORTH SUITE 406-5				2 Street A	ddress (P.O. Box Number is Not Acceptat	ole)	
	LLAS PARK FL 34666		8	3			J
			8	4 City		85 Zip	Code
				<u></u>		FL °°	
office or re agent. Lar	to the provisions of Sections 607 egistered agent, or both, in the 5 m familiar with, and accept the o	State of Florida. Such change v	was authorized I	ov the corbo	corporation submits this statement for the poration's board of directors. I hereby acceptance	ourpose of changing i pt the appointment as	s registered registered
SIGNATURE	Signature, typed or printed name of registere	ed agent and title if applicable	(NOTE Registered A	gent signature r	equired when reinstating)	DATE	
12.	OFFICERS	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTOR	RS IN 12
THILE	P	☐ DELETI	1.1 TITLE			Change	Addition
NAME	ZAPAL, DOROTA		1.2 NAM	E			
STREET ADDRESS	502 CANTERBURY LN.		1.3 STRE	ET ADDRESS			
City-St-2iF	LARGO FL		1.4 CITY	-ST-ZIP			
THEF	VP → DELETE		E 21 TITL		VP	change	■ Addition ■ Addition
NAME	ZAPAL, DARIUSZ		2 2 NAM	E I	• •		
STHEET ADDRESS	502 CANTERBURY LN		23 STRE	CI Whourso	ZAPAL, Arkadiusz	'e.	
CITY-SI-ZIP	LARGO FL		2 4 011	'- ST- ZIP	909 Brookside Dr	CLTWR, FL34	
TITLE	DELETE		E 31 TITL	:		Change	Addition
NAME			3.2 NAM	E			
STREET AODRESS			3.3 STRI	ET ADDRESS			
CITY - ST - ZIP				-ST-ZIP			
Title		☐ DELET	E 4.1 TITL	: T		Change	Addition
NAME			4. 2 NAM	AE :			
STREET ADDRESS			4.3 STRI	ET ADDRESS			
CITY - S1 - 7IP			4.4 CITY	-ST-ZIP			
TITLE		DELET	E 5.1 TiTL	: T		☐ Change	Addition
NAM!			5.2 NAM	E			
STREET ADDRESS			5.3 STR	ET ADDRESS			
E-TY-ST-ZIP				·ST-ZIP			
TITLE		☐ D€LET	E 6.1 TITL	·]		Change	Addition Addition
NAME			6.2 NAN	E			
STREET ADDRESS			6.3 STR	ET ADDRESS	v.		
CITY-ST-ZIP			6.4 CIT1	-ST-ZIP			

14. I do 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 angual 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 changes or open attachment with an address.