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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS										
DOCUI	MENT #	P95000	0077798 (3)						
1. Corporation SLIM'S			•	•						
OLINI C	, 1140						 	TAUN ARIH IRA	!!	E HEIRI BELLINAR
Principal Place	of Rusiness		B. A. S. C. C. B. A. C.							
Principal Ptace of Business Mailing Address 2763 CENTRAL AVE. 2763 CENTRAL AVE.										
	BURG FL 33713		ST. PETERSBURG F							
							3. Date Incorporated or Qualified	3a. Date	of Last R	eport
2. Principal Pla	ace of Business		2a. Mailing Address				10/05/1995	<u></u>		
21	ace or Liushiess		28. Maining Address				4. FEI Number 65-0624839			Applied For Not Applicable
Suite, Apt	#, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional	
City & State			27 Ct - 8 Ct - 1					<u> </u>	Fee I	Required
23	,		City & State				Election Campaign Financing Trust Fund Contribution			0 May Be d to Fees
Zıp		Country	Zip	Cour	ntry		8. This corporation has liability for i	ntangible tax		
25 29 30 9. Name and Address of Current Registered Agent							Florida Statutes Yes No 10. Name and Address of New Registered Agent			
	J. 1101110 U.		riogisteres Agent		81	Name	10. Name and Address of New H	egistered A	gent	·
	T, JAMES E			}	82	Street Addres	ss (P.O. Box Number is Not Acceptable	(a)		
	NTRAL AVE.	00740				Officer Addre	55 (15. Post Horizon to Hot Audelpten)			
51. PEII	ersburg fl	. 33/13			83					
				Ī	84	City	777	E1	85 Zıçı	o Code
familiar witi	h, and accept t	the obligations of, Section	n 607.0505, Florida Statut	orized by the bi tes	orpo	oration's board	tion submits this statement for the purp Lof directors. Thereby accept the appo	oose of char pintment as r	iging its n egistered	egistered office agent. I am
12.	Styliatize typed or p	rited hame of registeric agent at OFFICERS AND		(bi/d): Bigestered)	A.yer	Esquature repond		DATE		
TITLE	PT		DELETE	1111	TLF	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFI		Change	Addition
NAME	DORSETT,			1.2 NA	ME			_	. 0	
STREET ADDRESS		AVE. NORTH ISBURG FL 33713		1.3 STF	REFI	ADORESS				
CITY - ST - ZIP TITLE	VS	1300NG FL 337 13	DELETE	1401	-	1 - 7/5				
NAME	DORSETT.	SARAH E		2 1 TH 2 2 NAt				Ļ	Change	Addition
STREET ADDRESS		AVE. NORTH				ADDRESS				
CITY+S1+ZIP	ST. PETER	RSBURG FL 33713		2 4 CIT						
Tille			☐ DELETE	3 1 TH	LF				Change	Addition
NAME STREET ADDRESS				3.2 NAI						
CITY-ST-ZIP						ADDRESS				
TOTLE			DELETE	3.4 C:T 4.1 TiT		1 - ZIP			Change	Addition
NAME				4.2 NAV		į			e nange	L. Madridi
STREET ADDRESS				4.3.5TA	REET	ADDRESS				
CITY-S1-ZiP				4 4 CIT	<u> Y - SI</u>	I - ZIF				
TITLE			DELETE	5 1 11					Change	Addition
NAME STREET ADDRESS				5.2 NAM		1000000				
CITY-S1-2IP				5 4 CiT		ADDRESS 1. 740				
TITLE	***************************************		☐ DELETE	6 1 TIT		-217		<u>_</u> _	Change	Addition
NAME ,				6.2 NAN	ME				erago	
STREET ADDRESS				63 STH	IEET A	ADDRESS				
CITY - ST - ZIP				6.4.005	о ет	7.0				

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 suppliemental annual report is true and accurate and Inal 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 arrandoment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE

Dorsett 4-16-96

Chapter 607, Florida Statutes. I further that is provided by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on arrandoment with an address.

SIGNATURE:

SIGNATURE

SIGNATURE AND TYPED OR PHINTED NAME OF SIGNING OFFICEN ON DIRECTOR.

Dorsett 4-16-96

Chapter 607, Florida Statutes. I further that the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information supplies 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 supplies 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 is 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 is supplied with the information

CR2E034 (12/95)