## 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

## DOCUMENT # P95000094405 (4)

Principal Place 103 CLEVELANG LARGO FL 3464	AVENUE S.W.	Mailing Address 103 CLEVELAND AVENUE LARGO FL 33770-3604	S.W.			
					<ol> <li>Date Incorporated or Qualified 12/12/1995</li> </ol>	3a. Date of Last Report 03/20/1996
·	lace of Business	2a. Mailing Address	· · · · · · · · · · · · · · · · · · ·	<del></del>	4. FEI Number	Applied For
21		26			59-3352155	Not Applicable
Suite, Apt. #, etc.		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		Chus State			Fee Required	
City & State	€	City & State	.*		6. Election Campaign Financing	\$5.00 May Be
<b>23</b> Zip	Country	28     Zip	Countr		Trust Fund Contribution	Added to Fees
	··	29	<b>├</b> ──┐	y	This corporation has liability for Florida Statutes	Interngible tax under s. 199.032,  Ziyes No
24	25   9. Name and Address of Curren		30]		10. Name and Address of New Re	<del></del>
DEIN	HARDT, ROBERT		81	Name		
	CLEVELAND AVENUE S.W.					
	30 FL 34640		62	Street Add	ress (P.O. Box Number is Not Acceptal	ble)
LAIN	30 11 31010		83			
			Ľ	<u> </u>		
ļ			84	City		FL 85 Zip Code
11. Pursuant office or r agent La					poration submits this statement for the tion's board of directors. I hereby acce	
12.	Signature Applied or princed name of registered age.  OFFICERS AND		TE: Registered Ag	ant signature requi	ired when reinstating) ADDITIONS/CHANGES TO OFFI	DATE TERS AND DIRECTORS IN 12
TILL	D	DELETE	1.1 THILE	<del></del>	ADDITIONS/OFFININGES TO GITT	Change Addition
NAM:	REINHARDT, GERALD M		1.2 NAME			
SIBELL ADDRESS	103 CLEVELAND AVENUE S.W.			T ADDRESS		
City-St-ZiP	LARGO FL 34640		1.4 CITY-			
1011	0	☐ DELETE	2.1 TITLE	31-21	<u> </u>	Change Addition
NAME	REINHARDT, JO ANN M		2.2 NAME	ĺ		•
STREET ADORESS	103 CLEVELAND AVENUE S.W.			T ADDRESS		
City St. Zif	LARGO FL 34640		2. 4 CiTY-			
1-11-5		☐ DELETE	31 TITLE	31-ZW		Change Addition
NAME			3.2 NAME			•
STREET ADDRESS				T ADDRESS		
City S1-ZiP			3.4. CITY-	[		
TITLE		☐ DELETE	4.1 TITLE			Change Addition
NAVS			4. 2 NAME			•
STREET ADDRESS			i i	T ADDRESS		
City-S1-ZiP			4.4 CITY-			
TITLE		DELETE	5.1 TITUE			Change Addition
NAME			5.2 NAME	Ì		
STREET ADORESS			5.3 STREE	T ADDRESS		
CHY-S1-ZIP			5.4 CITY-			
1:11.5		☐ DELETE	61 TITLE			Change Addition
NAME.			6.2 NAME			
STREET ADDRESS			6.3 STREE	T ADORESS		
	}		0.10(7)(	07.70	4	

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 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 tylistee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 12 or on an attachment with an address.

**SIGNATURE:** 

[[CONTROL | Gerald M. Reinhardt 3/19/97 (813)596-3826

**FILED** 

Mar 27 1997 8:00am

Secretary of State