

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

FILED
May 05 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000017736 (5)

1. Corporation Name

STARGATE VENTURES, INC.

Principal Place of Business

5871 80TH AVE N
PINELLAS PARK FL 34666

Mailing Address

5871 80TH AVE N
PINELLAS PARK FL 33782-4916

3. Date Incorporated or Qualified

02/28/1996

3a. Date of Last Report

2. Principal Place of Business

21 30139 US 19 N.

Suite, Apt. #, etc.

22

City & State

23 Clearwater FL

Zip

Country

24 34621 25 USA

2a. Mailing Address

26 30139 US 19 N.

Suite, Apt. #, etc.

27

City & State

28 Clearwater FL

Zip

Country

29 34621 30 USA

4. FEI Number

59-3350586

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. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

FARRINGTON, MICHAEL J
5871 90TH AVE N
PINELLAS PARK FL 34666

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE

NAME
FARRINGTON, MICHAEL J
STREET ADDRESS
5871 90TH AVE N
CITY - ST - ZIP
PINELLAS PARK FL 34666

☐ DELETE

1.2 TITLE

NAME
BRADSHAW, FREDERICK H
STREET ADDRESS
5871 90TH AVE N
CITY - ST - ZIP
PINELLAS PARK FL 34666

☐ DELETE

1.3 TITLE

NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

1.4 TITLE

NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

1.5 TITLE

NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

1.6 TITLE

NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

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 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: *Michael J. Farrington*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APR 23 - 97 813-772-1501
Date Daytime Phone #

CR2E034 (9/96)