SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT 1997

22

23

City & State



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000019907. (0)

Country

SRWD, INC. Principal Place of Business Mailing Address 715 WEST PLATT ST. 715 WEST PLATT ST. TAMPA FL 33606 TAMPA FL 33606 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 03/05/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-3364767 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired

City & State

Ζip

Zip 8. This corporation owes or has paid the current year Intangible Yes 24 Personal Property Tax due June 30. 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DONICA, HERBERT R 201 EAST KENNEDY BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 1500** 83 TAMPA FL 33602 84 City Zip Code

Country

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 607,0506, Florida Statutes.

SIGNATURE Signature, typed or printed have of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETE 11 TITLE Change Addition Responde President NAME RICHARY W. BARdON 1.2 NAME CR2E034 715 W. PIAH ST. STREET ADDRESS 1.3 STREET AUDRESS TAMPA, FIN. 33604 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change ☐ Addition TITLE 2.1 THLE 200002271562----08/19/97--01074--024 NAME 2.2 NAME STREET ADDRESS 23 STHEET ADDRESS ****165.00 ****165.00 CITY-ST-ZIP 2. 4 CITY - ST - 7 IF DELETE Change Addition TIMLE 3.1 THE 3.2 NAME NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3 4. City - ST - ZIP DELETE Change ■ Addition TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE 5.1 TITLE Change Addition TITLE NAME **5.2 NAME** STREET ADDRESS 53 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - 7/P DILETE TITLE 6.1 THE Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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 offect 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.

410 1-1902

407-4122-6996

192

Applied For

Fee Regulred

\$5.00 May Be

Added to Fees

Not Applicable

FILED

97 AUG 14 AH 9: 02

6. Election Campaign Financing

Trust Fund Contribution

To whom I+ may Concern

This was the First Notice I Recieved

Thanks Ridal W. Darle