

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Aug 20 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P96000023188 (1)

1. Corporation Name

BRONCO ENTERPRISES, INC.

Principal Place of Business

11277 - 54TH AVENUE NORTH  
ST. PETERSBURG FL 33708

Mailing Address

11277 - 54TH AVENUE NORTH  
ST. PETERSBURG FL 33708

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/14/1996

4. FEI Number

59-3366295

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 owes or has paid the current year intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 5390 DUHME ROAD

Suite, Apt. #, etc.

2a. Mailing Address

26 5390 DUHME ROAD

Suite, Apt. #, etc.

City & State

23 ST. PETERSBURG FL

City & State

28 ST. PETERSBURG FL

Zip

24 33708

Country

25 PINELLAS

Zip

29 33708

Country

30 PINELLAS

9. Name and Address of Current Registered Agent

HOFSTRA, PETER T  
8640 SEMINOLE BLVD.  
SEMINOLE FL 34642

10. Name and Address of New Registered Agent

81 Name

HUNT, CLIFFORD J

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

4TH FLOOR, North Tower

83

100 2nd Avenue South

84 City

ST. Petersburg

FL

85 Zip Code

33701

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 of officer or principal officer of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

8/11/98

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME FRY, GARY  
STREET ADDRESS 3999 FOX MILL DR  
CITY-ST-ZIP BOOTHWYN PA 19061

TITLE V ☐ DELETE

NAME FRY, THOMAS SR  
STREET ADDRESS 11277 54TH AVE NORTH  
CITY-ST-ZIP ST PETERSBURG FL 33708

TITLE S ☐ DELETE

NAME FRY, THERESE  
STREET ADDRESS 11277 54TH AVE NORTH  
CITY-ST-ZIP ST PETERSBURG FL 33708

TITLE T ☐ DELETE

NAME FRY, THOMAS JR  
STREET ADDRESS 11277 54TH AVE NORTH  
CITY-ST-ZIP ST PETERSBURG FL 33708

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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:

Signature of Registered Agent

7/10/98

CR2E034 (5/98)