

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

FILED

Apr 23 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000037407 (9)**

1. Corporation Name
OSPINAS CORP.

Principal Place of Business
**7616 W HILLSBOROUGH AVENUE
TAMPA FL 33615**

Mailing Address
**7616 W HILLSBOROUGH AVENUE
TAMPA FL 33615-4106**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/30/1996	3a. Date of Last Report
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-3382929	Applied For <input type="checkbox"/> Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
OSPINA, PATRICIA 7616 W HILLSBOROUGH AVENUE TAMPA FL 33615		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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OSPINA, PATRICIA	12 NAME	
STREET ADDRESS	8216 GREENLEAF	13 STREET ADDRESS	
CITY - ST - ZIP	TAMPA FL 33615	14 CITY - ST - ZIP	
TITLE	D	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OSPINA, GERMAN SR	22 NAME	
STREET ADDRESS	8907 SHANDWICK	23 STREET ADDRESS	
CITY - ST - ZIP	TAMPA FL 33615	24 CITY - ST - ZIP	
TITLE	D	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OSPINA, GERMAN JR	32 NAME	
STREET ADDRESS	8909 PLUM GROVE CT	33 STREET ADDRESS	
CITY - ST - ZIP	TAMPA FL 33634	34 CITY - ST - ZIP	
TITLE	D	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OSPINA, CARLOS M	42 NAME	
STREET ADDRESS	8720 PRESTON CT	43 STREET ADDRESS	
CITY - ST - ZIP	TAMPA FL 33615	44 CITY - ST - ZIP	
TITLE	D	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OSPINA, MARIA B	52 NAME	
STREET ADDRESS	8720 PRESTON CT	53 STREET ADDRESS	
CITY - ST - ZIP	TAMPA FL 33615	54 CITY - ST - ZIP	
TITLE	TD	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OSPINA, MARCO T	62 NAME	
STREET ADDRESS	9114 POST OAK CT	63 STREET ADDRESS	
CITY - ST - ZIP	TAMPA FL 33615	64 CITY - ST - ZIP	

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/97 (819)243-8810

Date

Daytime Phone #

0362206

CR2E034 (9/96)