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 # P96000038706 (3)

STREET EAGLE OF NORTH AMERICA, INC.

Principal Place of Business

Mailing Address

14187 BIST AVE N

14187 BIST AVE N

FILED Mar 17 1997 8:00am Secretary of State



SEMINOLE FL 34646		SEMINOLE FL 33776-3310						
						3. Date Incorporated or Qualified 05/06/1996	3a. Date of L	ast Report
	Place of Business	2a. Mailing Address				4. FEI Number		Applied For
21 /2505	5 66th ST. NORTH	26 13505 66th ST. NONTH			59-3375935		Not Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	1 1	.75 Additional ee Required
City & State	e	City & State				6. Election Campaign Financing	\$5	5.00 May Be
23 LARG	-0, FL.	28 LARGO,	FL			Trust Fund Contribution		dded to Fees
Zip	Country	Zip	Count			8. This corporation has liability for i		der s. 199 032,
24 3377		29 3377/	30 //	UELL.	45		Yes 🔀 No	
	9. Name and Address of Current	Registered Agent		T		10. Name and Address of New Re	gistered Agent	
CHIGOS, JOHN				81 Name				
877 EXECUTIVE CENTER DRIVE W, SUITE 303 ST PETERSBURG FL 33702			8	2 Stree	Street Address (P.O. Box Number is Not Acceptable)			
. : 14			8	3				
Lauren			8	4 City			FL 85	Zip Code
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of im familiar with, and accept the obligation.	l Florida, Such change was	authorized I	by the co	d corpo rporatio	ration submits this statement for the p n's board of directors. I hereby accep	urpose of chang t the appointme	jing its registered nt as registered
SIGNATURE	Signature, typed or printed name of registered agent	and short arolicable (NCII	IF Braistred A	nont sinuat i	ru teni kon	when redistating)	DATE	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFIC	· · · · · · · · · · · · · · · · · · ·	CTORS IN 12
TITLE	PSTD	DELF1E .	1.1 TITLE				☐ Ch	ange Addition
NAME	SPOTO, ROBERT A		1.2 NAM	E				
STREET ADDRESS	14187 81ST AVE N		1.3 STRE	E1 ADDRESS				
CITY-ST-ZIP	SEMINOLE FL 34646		1.4 CUTY	- ST- 2)P				
TITLE	VO	☐ DELETE	2.1 TITLE		T		Ch	ange Addition
NAME	PALOSCIO, MICHAEL		22 NAMI	22 NAME				
STREET ADDRESS	14187 81ST AVE N		23 S1HE	LI ADDRESS				
CITY-ST-ZIP	SEMINOLE FL 34646		2 4 CHY	- \$1 - ZIP				
TITLE		DELETE	3 1 TH LE				L Ch	ange 🔲 Addition
NAME			32 NAMI	E				
STREET ADDRESS			3 3 STHE	ET ADDRESS				
CITY-ST-ZIP			3 4. CITY					
TITLE		L DELETE	4 1 TITLE				∐ նհ	ange L Addition
NAME			4. 2 NAM					
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP TITLE		DELLITÉ	4.4 DITY		· 		□ Ch	ange Addition
			51 THEF				الل ئے	angs L_1 Addition
NAME			5.2 NAM					
STREET ADDRESS			4	FT ADDRESS				
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - 6.1 TITLE				Chi	ange Addition
NAME		<u> В вили</u>	6.1 MIN 6				On	mge L roundi
1								
STREET ADDRESS				ET ADORESS				
14. I do hereb	by certify that the information supplied v	with this filling does not quali	€ 6.4 City fy for the ex		L slaled i	n Section 119 07(3)(i) Florida Statutes	I further certify	that the
informatio I am an oi	n indicated on this annual report or sup flicer or director of the corporation or th n Block 12 or Block 13 if changed or o	oplemental annual report is t le receiver or trustee empov	irue and acc vered to exc	curate an	d that m	ny signature shall have the same legal	effect as if mad	de under oath; that