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

PROFIT CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Militaa

Secretary of State DIVISION OF CORPORATIONS

## POCUMENT # P96000040617 (8)

NATIONAL PREMIER, INC.

Principal	Place	of	Business

Mailing Address

2a. Mailing Address

3015 46TH AVENUE NORTH ST. PETERSBURG FL 33714

3015 46TH AVENUE NORTH ST. PETERSBURG FL 33714-3815

## **FILED** May 20 1997 8:00am Secretary of State

3a. Date of Last Report



3. Date Incorporated or Qualified

05/10/1996

2. Principal Place of Business		2a. Mailing Add	lress				4. FEI Number	 }		pplied For	
1 1 1 26 Suite, Apt. #, etc. Suite, Apt. #, etc.		, etc.				3-1 310 21 31			Not Applicable \$8.75 Additional		
27		27			_	5. Certificate of Status Desired		Fee Re			
City & State City & State								\$5.00			
23 Zip			Country						to Fees		
24 25	· Francisco François			,	8. This corporation has liability for intangible tax under s. 199.032  Florida Statutes						
	Address of Current R	egistered Agent				L	10. Name and Address of New F	Registered A	Agent		
FINK, DIANA				81	Name				1.1.1.0.41.		
3015 46TH AVENUE NORTH ST. PETERSBURG FL 33714			82	82 Street Address (P.O. Box Number is Not Acceptable)							
				83							
			83								
			84	City		···		<b>85</b> Zip (	Code		
					·	v 7=	FL	.			
SIGNATURE	ned name of registered agont is						ation submits this statement for the is board of directors. I hereby acc when reputating)	DATE			
12.	OFFICERS AND D	OIRE CTORS		13.			ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECTOR	IS IN 12	
tore D			DELETE	1.111115					Change	Addition	
PINK, DIANA			<b>.</b>	1,2 NAME							
	venue North		J.	1:3 STREET	ADDRESS						
	URG FL 33714			1,4 CITY - S	1-7IP						
TITLE D				2 1 TITLE	İ				Change	Addition	
NAME COX, EBBIE I				2.2 NAME	ļ						
	VENUE NORTH			2.3 STREFT	1						
ST. PETERSB	URG FL 33714			2 <u>, 4 CITY - 5</u> 3 1 TITLE	31- ZIP	151	800108	<del></del>	Change	Addition	
NAME RESIDEN	CSWHAS SOUBER			32 NAME	-	TR	ractor evor Smith 15 46 Ave N Refersburg 1 F		L one-igo	<b></b>	
STREET ADDRESS 3013	o Parei	01		3 3 STREET	ADDRESS	30	15 46 Ave N				
CITY-6T-ZIP ST YEX	ग्रहामात्ते	FL 33	117	3.4 CITY-5	ST - ZIP	ŠÃ	Refersaura , F	1633	3714	•	
TALE				4.1 TITLE	1				Change	Addition	
NAME			Į.	4. 2 NAME	ĺ						
STREET ADDRESS			<b>.</b>	4.3 S1KF&1	ADDRESS						
CITY-ST-ZIP				4.4 CITY - S	1 - ZIP						
TITLE				5.1 TITLE	ļ				Change	Addition	
			<b>I</b> :	5.2 NAME	i						
NAME					- 1						
name Street address				5.3 STREET	- 1						
NAME STREET ADDRESS CATY-ST-ZIP		<b></b>	,	\$ 4 CITY - S	- 1			·	Change	Addition	
NAME STREET ADDRESS CATY-ST-ZIP 111LE			DELETE	<u>\$ 4 011Y-S</u> 6.1 1DLE	- 1				Change	Addition	
name street address caty-st-zip title name		<u> </u>	DE LETE .	\$ 4 0/1Y - S 6.1 TITLE \$.2 NAME	T-ZIP			<del>, , , , , , , , , , , , , , , , , , , </del>	Change	Addition	
			DE LETE (	<u>\$ 4 011Y-S</u> 6.1 1DLE	T-ZIP ADURESS				Change	Addition	

La Galleria