

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

FILED
Mar 14 1997 8:00am
Secretary of State

DOCUMENT # **P96000063418 (3)**

1. Corporation Name
PROKORE, INC.



Principal Place of Business
**2275 ATLANTIC BLVD
NEPTUNE BEACH FL 32266**

Mailing Address
**2275 ATLANTIC BLVD
NEPTUNE BEACH FL 32266-2547**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

**SORRELL, MARY C
2275 ATLANTIC BLVD
NEPTUNE BEACH FL 32266**

3. Date Incorporated or Qualified

07/30/1996

3a. Date of Last Report

4. FEI Number

59-3344777

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Trust Fund Contribution

☐

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes

☐ No

10. Name and Address of New Registered Agent

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 representative (if applicable)

(SOLE Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD**
NAME **HIONIDES, CHRIS**
STREET ADDRESS **2275 ATLANTIC BLVD**
CITY-ST-ZIP **NEPTUNE BEACH FL 32266**

☐ DELETE

TITLE **VD**
NAME **SORRELL, MARY C**
STREET ADDRESS **2275 ATLANTIC BLVD**
CITY-ST-ZIP **NEPTUNE BEACH FL 32266**

☐ DELETE

TITLE **SD**
NAME **HIONIDES, NADIA**
STREET ADDRESS **2275 ATLANTIC BLVD**
CITY-ST-ZIP **NEPTUNE BEACH FL 32266**

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

Title: **Secretary**

XXXX Change

☐ Addition

Title: **Vice-President**
Director

XXXX Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 or Block 14 or in an attachment with an address.

SIGNATURE **[Signature]** President 2/2/97 (991) 241-1501

CR2E034 (9/96)