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## 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 # **P96000067628** (3)

1. Corporation STAINLE	on Name ISS MUSI	C, INC.		(-,								
Principal Plac	e of Busines	s	Mailing	Address				-{	. <b></b>			
12800 INDIAN F LARGO FL 3464	OCK8 ROAD		12900 IND	12800 INDIAN ROCKS ROAD. SUITE 3 LARGO FL 33774-2000								
								3. Date Incorporated or Qualified 08/09/1996	<b>3a</b> . Da	ate of Last R	eport	
2. Principal F	Place of Busin	ness	<u>├</u> ──¬	2a. Mailing Address				4. FEI Number 59-3406579		Ap	oplied For of Applicable	
Sulte, Apt	#, etc.		—	Suite, Apt. #, etc. 27				Certificate of Status Desired     Section   Section				
City & Stat	le			City & State				6. Election Campaign Financing \$5.00 May Be				
23			28	28				Trust Fund Contribution Added to Fees				
Zip	Country		Zip	Zip		Country		8. This corporation has liability for intangible tax under s. 199.032,				
24				30	0		Florida Statutes  Yes X No					
		and Address of Cu	rrent Registered	Agent	B1			10. Name and Address of New Re	gistered	Agent		
MARRA, SEAN J						Name					}	
12800 INDIAN ROCKS ROAD, SUITE LARGO FL 34844			(E 3			Street	Addre	ss (P.O. Box Number is Not Acceptal	ole)			
	<b>40</b> (4 <b>0</b> 70	•							<del></del>			
					84	City			FL	<b>85</b> Zip (	Code	
office or i	registered ac		late of Florida, Su	ich change was	s authorized by	the cor		oration submits this statement for the pon's board of directors. I hereby acce	purpose o	f changing its		
SIGNATURE		or printed name of registered			OTE: Registered Age		e monirer	d when rejostahoo)	DATE			
12.			AND DIRECTORS					ADDITIONS/CHANGES TO OFFIC		DIRECTOR	IS IN 12	
TITLE	D			☐ DELETE		1.1 TITLE 1.2 NAME		>		Change	Addition	
NAME	MARRA, 8											
STREET ADDRESS					1.3 STREET	ADDRESS					ĺ	
CITY-ST-ZIP	LARGO F	L 34844			1.4 CITY - S	T-ZIP	] .				j	
TITLE				☐ DELETE	2.1 TITLE		N/C	>		Change	★ Addition	
NAME				2.2 NAME			Dai	Daniel J. Eagan 12800 WHAN ROCKS RD, SUITE3 LANGO FL 3444				
STREET ADDRESS	ADORESS (						128	800 which bocks po	. 50 [1	<b>E3</b>	ĺ	
CITY-ST-ZIP					2. 4 CITY-5	ST - ZIF	LA	troo FL 34444				
TITLE				DELETE	3.1 TITLE			•		☐ Change	Addition	
NAME					3 2 NAME							
STREET ADDRESS					3.3 STREET		}					
CITY-ST-ZIP	<del> </del> -	_ <del></del>		DELETE	3.4 CITY - :	S1-ZIP	ł			Change	Addition	
TITLE			LJ offere	4.1 TITLE					- Change	L., Addition		
NAME CENTER ADDRESS					4.2 NAME	<b>MODDECO</b>	ļ				}	
STREET ADDRESS					4.3 STREET 4.4 City - S			_	•			
CITY-ST-ZIP TITLE			<del></del>	DELETE	5.1 TITLE	1-21			\	Change	Addition	
NAME						5.2 NAME		1/1	y. (1)	\		
STREET ADDRESS					5.3 STREE1	22480CIA		V	1.	•,		
CITY-ST-ZIP	1				5.4 CITY - S			·	10			
TITLE	<del> </del>			DELETE	6.1 1/1LE	1 211	<del> </del> -			Change	Addition	
NAME					62 NAME							
STREET ADDRESS	1				6.3 STREFT	ADDRESS			. ^	1	}	

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 13 if changed, or on an attachment with an address.

SIGNATURE: Seen J. Slores Abull thouse Boll

4124197

813-593-1559

**FILED** 

Jun 06 1997 8:00am

Secretary of State