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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 08 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000084264 (6)

NAME	Principal Plac	e of Businoss	Mailing Address			
SURE 111 ST. PETERSBURG FL 33704 ST. PETERSBURG FL 33704 SURE 111 ST. PETERSBURG FL 33704 SURE AND API #, etc.  22	· ·		· ·			
2. Principal Place of Business   2a. Mailing Address   2b. Mailing	SUITE 111		SUITE 111			
2. Principal Piece of Business   2a. Mailing Address   25. Mailing Address   25. Mailing Address   25. Suite, Apt. #, etc.   25. Suite, Apt. #, etc.   25. Suite, Apt. #, etc.   27. Suite, Apt. #, etc.   28. Suite, Apt. #, etc.	ST. PETERSBU	RG FL 33704	ST. PETERSBURG FL 3370	4-2102	0.000	
Principal Place of Business   2a. Multing Address   25   25   25   25   25   25   25				·		i
Sulfa, Apt. 4, etc.	2. Principal P	lace of Business	2a. Mailing Address		the first terms of the second	d Eng
Sulle, Apt. 4, etc.  22   27   City & State   Country   Zip   Country   Zip   Country   Zip   Country   Added to Fee Required   Added to F			h1		TAPPINO IN TAPPINO	
Pee Required   27		#, etc.			\$8.75 Additi	
Zip Country 7ip Country 8ip 18ip 18ip 18ip 18ip 18ip 18ip 18ip	22		27	·		
28   Trust Fund Contribution   Added to Fee		6	City & State		6. Election Campaign Financing \$5.00 May	Be
25   29   30   Florida Statutes   Yes	23					
MOUNTAIN, JOHN B JR. 2800 4TH STREET N. SUITE 111 ST. PETERSBURG FL 33704  182 Street Address (P.O. Box Number is Not Acceptable)  183 Street Address of New Registered Agent  184 City  185 Street Address (P.O. Box Number is Not Acceptable)  186 City  187 City  188 C		├ <del></del> -		h	8. This corporation has liability for intangible tax under s. 199.	.032,
MOUNTAIN, JOHN B JR. 2800 4TH STREET N. SUITE HIS STREET ADDRESS CPT-ST-2P	24			[30]		
200 4TH STREET N. SUITE 111 ST. PETERSBURG FL 33704  82 Street Address (P.O. Box Number is Not Acceptable)  83 City FL 85 Zip Code  11. Pursuant to the provisions of Socilions 607.0502 and 607.1508, Florida Statutes, the above-name corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Such change was author/zeed by the corporation's board of directors. I hereby accept the exposiment as regists agent. I am familiar with, and accept the obligations of, Section 607.0508, Florida Statutes  SIGNATURE Signature  Displace typed or protect name of registered agent low it applicable.  Displace typed or protect name of registered agent low it applicable.  Displace typed or protect name of registered agent low it applicable.  Displace typed or protect name of registered agent low it applicable.  Displace typed or protect name of registered agent low it applicable.  Displace typed or protect name of registered agent low it applicable.  Displace typed or protect name of registered agent low it applicable.  Displace typed or protect name of registered agent low it applicable.  Displace typed or protect name of registered agent low it applicable.  Displace typed or protect name of registered agent low it applicable.  Displace typed or protect name of registered agent low it applicable.  Displace typed or protect name of registered agent low it applicable.  Displace typed or protect name of registered agent low it as possible registered agent or registered agent low its statetered for the purpose of changing its registeries by the corporation's board of directors. I hereby accept the exposition agent as registeries board of directors. I hereby accept the exposition agent as registeries board of directors. I hereby accept the exposition agent as registeries board of directors. I hereby accept the exposition agent as registeries board of directors. I hereby accept the exposition agent as registeries bor protect name of directors. I hereby accept the exposition agent	1401		it Hadistelan Wallit	81 Name	10. Name and Address of New Registered Agent	
SUITE 111 ST. PETERSBURG FL 33704  B3  B4 City  FL B5 Zip Code  T1. Pursuant to the provisions of Socialons 697.0502 and 607.1508, Florida Statutes, the abover-named corporation submits this statement for the purpose of changing its regist 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 regist agent. I am familiar with, and accept the obligations of, Section 697.0505, Florida Statutes  SIGNATURE  S						
ST. PETERSBURG FL 33704  83  64 City  FL 85 Zip Code  11. Purauant to the provisions of Socilons 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its regist object. I am familiar with, and accopit the obligations of Socilon 607.0505, Florida Statutes  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 THIS CONTROL 12 LANAR  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  DELETE  11 THIS  12 ANAR  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  DELETE  13 STREET ADDRESS  CITY-ST-ZIP  DELETE  14 CITY-ST-ZIP  DELETE  15 THIS  16 City  THE CITY-ST-ZIP  TITLE  DELETE  17 THIS  18 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  18 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  18 STREET ADDRESS  CITY-ST-ZIP  THE ST-ZIP  THE ST-Z				82 Street Add	ress (P.O. Box Number is Not Acceptable)	
SIGNATURE   DATE   Change   J.				83		
11. Pursuant to the provisions of Soctions 607.05.02 and 607.15.08, Florida Statutes the above-named corporation submits this statement for the purpose of changing its registred agont, or both, in the State of Florida Statutes  SIGNATURE  SIGNATURE  Signature, typind or printed rune of highered agent and the if applicable. (NOTE fregletical Agent signature required when receivang)  DATE  12. OFFICERS AND DIRE CLORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN THE MOUNTAIN, JOHN B JR.  STREET ADDRESS  CITY-ST-ZIP  NAME  STREET ADDRESS  ST. PETERSBURG FL 33704  DELETE  DELETE  DELETE  DELETE  DELETE  2 1 Intit  1 2 NAME  1 2 NAME  1 2 NAME  1 3 SIREET ADDRESS  CITY-ST-ZIP  DELETE  2 1 Intit  1 Change  7 2 SIREET ADDRESS  CITY-ST-ZIP  NAME  STREET ADDRESS  CITY-ST-ZIP  DELETE  DELETE  3 1 NILE  DELETE  3 2 NAME  3 3 SIREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  3 3 NILET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  DELETE  3 3 NILET  DELETE  3 3 NILET  Change  7 NAME  3 3 SIREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  3 3 NILET  DELETE  3 3 NILET  Change  7 NAME  3 3 SIREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  3 3 NILET  DELETE  3 3 NILET  Change  7 NAME  3 3 SIREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  3 SIREET ADDRESS  5 3 SIREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  5 1 NILE  CHANGE  5 3 SIREET ADDRESS  CITY-ST-ZIP  CHANGE  STREET ADDRESS  CITY-ST-ZIP  DELETE  5 1 NILE  NAME  STREET ADDRESS  CITY-ST-ZIP  NAME  STREET ADDRESS  S SIREET ADDRESS  S SIRE	91. (	PETENODONO TE 33704				
11. Pursuant to the provisions of Socions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its reginal office or registered agent. I am termiliar with, and accept the obligations of, Section 607.0508, Florida Statutes    SIGNATURE				84 City	FI 85 Zip Code	: 1
12.						slored
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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 eath; 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.