

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

FILED
May 15 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000087510 (9)

1. Corporation Name

YBOR BOX COMPANY



Principal Place of Business

GLADES BUILDING, SUITE 303
877 EXECUTIVE CENTER DRIVE, WEST
ST. PETERSBURG FL 33702

Mailing Address

GLADES BUILDING, SUITE 303
877 EXECUTIVE CENTER DRIVE, WEST
ST. PETERSBURG FL 33702-2460

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

3. Date Incorporated or Qualified

10/23/1996

3a. Date of Last Report

4. FEI Number

59-3414674

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be
Added to Fees

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

Yes No

9. Name and Address of Current Registered Agent

MASCARA, ERNEST L
GLADES BUILDING, SUITE 303
877 EXECUTIVE CENTER DRIVE, WEST
ST. PETERSBURG FL 33702

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 registered agent and title, if applicable

(NOTE: Registered Agent signature required when re-appointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	XXX	☐ DELETE
NAME	MASCARA, ERNEST L	
STREET ADDRESS	GLADES BLDG., #303, 877 EXEC. CENT. DR. W.	
CITY-ST-ZIP	ST. PETERSBURG FL 33702	
TITLE	DP	☐ DELETE
NAME	JOHN LODER	
STREET ADDRESS	877 Executive Center Dr. W., Ste 303	
CITY-ST-ZIP	St. Petersburg, FL 33702	
TITLE	DVP	☐ DELETE
NAME	NICHOLAS I PERDOMO, JR.	
STREET ADDRESS	877 Executive Center Dr. W., Ste 303	
CITY-ST-ZIP	St. Petersburg, FL 33702	
TITLE	DT	☐ DELETE
NAME	SPIROS G. HAMPILOS	
STREET ADDRESS	877 Executive Center Dr. S., Ste 303	
CITY-ST-ZIP	St. Petersburg, FL 33702	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DS	☒ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☒ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☒ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☒ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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

SIGNATURE

John Loder, President

(813) 579-4662

CR2E034 (9/96)