## 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** 

Apr 28 1997 8:00am

Secretary of State

## DOCUMENT # P96000101313 (0)

TRIAL TACTICS, INC.

								1					
Principal Place of Business Mailing Address									1 TO BELLO DE LUB ROLLA	BILLI BREIF BRIDI BRIDI		103	460 <b>138</b> 0
206 S. BEVERLY AVE.         206 S. BEVER           TAMP FL 33609         TAMP FL 3360					BEVERLY AVE. L 33609-2920								
									3. Date Incorpora 12/16/1996	ted or Qualified		te of Last R	
2. Principal Pi		1088	2a. I	2a. Mailing Address					4. FEI Number	000		Ap	optied For
21 Same				26 Same.					34-34/3/35 Not Applicable				
Suite, Ap1. #, etc.				Suite, Apt. #, etc. 27					5. Certificate of Status Dosired Fee Required				
City & State				City & State					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip		Country	ļ i	Zip	<u> </u>	Country	<b>y</b>		8. This corporatio				. 199.032,
24		25	[29]		30		<del></del>		Florida Statutes  10. Name and Add			No	
9, Name and Address of Current Registered Agent							Name		10. Name and Adi	Tess of New Re	gistered A	tgent	
FILINGS, INC.							Ivaille	CH	SOL P.	WELL.	<u> </u>		
3732 N.W. 16TH STREET						82	Street	t Addres	s (P.O. Box Numbe	is Not Acceptab	(e)		
FT. L	AUDERDAI	LE FL 33311-4132				83	20	د و	o. Bever	CY AL	16		
						"							
						84	'	TAM	PA,		FL	1 7	3609
11. Pursuant i office or re agent. La	to the provis egistered ag m farytiar wi	sions of Sections 607 gent, or both, in the 5 ith, and aggopt the c	1.0502 and 601 State of Florida obligations of	7.1508, Florida St a. Such change w Section 607.0505	atutes, the as author , Florida (	e abov ized b Statute	e-named by the co is.	d corpor rporation	ration submits this s n's board of director	tatement for the p s. I hereby accep	ourpose of the appo	changing it cintment as	registered
SIGNATURE	l'ax	ollarens	Well	d CAKO	L PAI	512	WE	LLS			4	21-47	<b>7</b>
	Signature, typed	for printed name of registers		applicable.	(NO1E: Regis	··	ent signatu	re required	when reinstating)	11050 TO OFFI	DATE	DIDECTOL	20 141 40
12.	0	OFFICERS	AND DIRECT	DELETE		13. .1 TULE			ADDITIONS/CH.	ANGES TO OFFIC	JERS AND	Change	Addition
TITLE	D Weile c	ADOL D		[ DECEME								change	
NAME	WELLS, C	EVERLY AVE.				.2 NAME	T 4000000	.					
STREET ADDRESS	TAMP FL						T ADDRESS	'					
CITY-ST-ZIP TITLE	D	33009		DELETE		.4 CITY -	\$1 - ZIF	<del></del>				Change	Addition
'	_	E, VIRGINIA				2 NAME							
. NAME			NY RI VN				T ADDRESS	. \					
STREET ADDRESS STE. 663, 4048 W. KENNEDY BLVD.  CITY-ST-ZIP TAMPA FL 33609						2 4 CITY-ST-ZIP							
TITLE	train in i	L 00000		DELFTE		3.1 TITLE	JI-En	+				Change	Addition
NAME				-	3	2 NAME							
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TITLE !		~~~		DELETE		1 TITLE		1				Change	Addition
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NAME					6	2 NAME							
STREET ADDRESS						3 \$1RE6	1 ADDRESS	s					
CITY-ST-ZIP						34 CITY-	ST - ZIP	i					

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 open attachment with an address.