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 # P9700000042 (6)

WHITE CORPORATE SERVICES, INC.

Principal Place of Business Mailing Address

FILED May 21 1997 8:00am Secretary of State



10702 N. 46TH STREET TAMPA FL 33617				10702 N. 46TH STREET TAMPA FL 33617-3480								
								-	3. Date incorporated or Qua	lified Sa.	Date of Last R	eport
2. Principal P	Place of Busines	ss	2a.	2a. Mailing Address					4. FEI Number		TA	plied For
21				26				1.	59-34/1378		NK NK	t Applicable
Suite, Apt. #, etc				Suite, Apt. #, etc.					5. Certificate of Status Desired Fee Required			
City & State				City & State				6. Election Campaign Finant	inn	\$5.00	May Re	
23			28	28					Trust Fund Contribution		Added	
Zip	Zip Country			Zip Country				8. This corporation has liability for intangible tax under s. 199.032,				
24	[25]				30				Florida Statutes Yes No			
9. Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent					
CAMPBELL, JOHN W ESQ.							Name					
101 E. KENNEDY BLVD.						-		Addass	(D.O. D)			
SUITE 1080						82	Street	Address	(P.O. Box Number is Not Acc	ceptable)		
TAMPA FL 33602						83	 	·····			· · · · · · · · · · · · · · · · · · ·	
1AMFA FC 33502						L						
						64	City			F	85 Zip	Code
11 Purpupat	to the provision	e of Castions CO7	0500 and 60	2 1EOD Clasida Prote	udan eh				tion submits this statement fo		- 1	
office or r	to the provision registered agen	is of Sections 607. it, or both, in the S	tate of Florid	7.1508, Florida Stati a. Such change was	iules, in s autho	rized by	e-named v the con	poration's	s board of directors. I hereby	r the purpose accept the a	or changing it ppointment as	s registered registered
agent. I a	am tamiliar with,	and accept the ol	oligations of,	Section 607.0505, F	Florida	Statute	s.	•	•	•		
SIGNATURE		······································						·				
							ent signature	e required wi	hen reinstating)	DATE		- B 15 / L 5
12.	T VD	OFFICERS	AND DIREC	DELETE		13.			ADDITIONS/CHANGES TO	OFFICERS A		
TITLE	'	-		F" DECEIE		1.1 TITLE					Change	Addition
NAME	u u - v v v					1.2 NAME						
STREET ADDRESS	OL ELDELLE AND 40000						1.3 STREET ADDRESS		•			
CITY-ST-ZIP		NY 12302				1.4 CITY-5	iT-ZIP	ļ				····
TITLE	VSTD			☐ DELETE		2 1 TITLE		i			Change	Addition
NAME	HALLUSKA, THOMAS					2.2 NAME		'				
STREET ADDRESS							2.3 STREET ADDRESS		•		į.	
CITY-ST-ZIP	LUTZ FL 335	549				2. 4 CITY-ST-ZIP						
TITLE	VD			☐ DELETE			3.1 TITLE				Change	Addition
NAME	SCHNEIDER						3.2 NAME					
STREET ADDRESS	2413 BAY S	1703	3.			3.3 STREET ADDRESS						
CITY - S1 - ZIP	TAMPA FL 3	3629				3.4. CITY-	ST-ZIP	1				
TIILE	VD		***************************************	DELETE		4.1 TITLE	***********		······································		Change	Addition
NAME	EUKOVICH,	ROBERT				4. 2 NAME						
STREET ADDRESS	2632 BRIDLE						ADDRESS			•		
CITY-ST-ZIP	PLANT CITY		1			4.4 City-S						
101LE	1			OELETE		5.1 TITLE	. 41	 			Change	Addition
NAME						5.2 NAME		i				
STREET ADDRESS							ADDRESS		•			
CITY-ST-ZiP	 			DELETE		5.4 CITY - 5	SI-AP	 			Change	Addition
TITLE			,	C Officia		6.1 TITLE					Change	LL AUGIEUE
NAMÉ					H	6.2 NAME	:]				
STREET ADDRESS							ADDRESS					
CITY: ST- ZIP	<u> </u>					8.4 CITY - S	T- Z IP	<u> </u>		,,, , , , , , , , , , , , , , , , , , ,	·····	

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