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FILED
May 04 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000019044 (1)
1. Corporation Name

YBOR CITY GHOST WALK, INC.



Principal Place of Business

Mailing Address

157 BISCAYNE AVENUE
TAMPA FL 33606

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TAMPA FL 33606

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/28/1997

4. FEI Number

59-3442801

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 Same
Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Same
Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

SAUL-SENA, LINDA
157 BISCAYNE AVENUE
TAMPA FL 33606

10. Name and Address of New Registered Agent

81 Name Marilyn Mars
82 Street Address (P.O. Box Number is Not Acceptable)
157 Biscayne Ave.
83
84 City Tampa FL 85 Zip Code 33606

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

Marilyn Mars

Marilyn Mars V.P.

(NOTE: Registered Agent signature required when reinstating)

4/25/98

DATE

12. OFFICERS AND DIRECTORS

TITLE President, Secretary
NAME Linda Saul-Sena
STREET ADDRESS 157 Biscayne Ave
CITY-ST-ZIP Tampa, FL 33606

TITLE Vice President, Treasurer
NAME Marilyn A. Mars
STREET ADDRESS 2623 W. Jefferson Ave
CITY-ST-ZIP Tampa, FL 33629

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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

Marilyn Mars Marilyn Mars V.P. 4/25/98 59-3442801

CR2E034 (10/97)