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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700050408 (8)

SPRINGS THEATRE, INC.

## **FILED** Feb 17 1998 8:00am Secretary of State



Principal Place of Business	Mailing Address		- i ingeridde tid tottt famt abter dättt dattt ber	37 BIŞLI QQLEL QIŞEL BBIBI 2911 1981
16008 GATWICK COURT TAMPA FL 33647  16008 GATWICK COURT TAMPA FL 33647			DO NOT WRITE IN T	THIS SPACE
		•	3, Date Incorporated or Qualified	
Principal Diagonal Susings	La Mailine Address		06/09/1997	
2. Principal Place of Business  8029 N. NEBRASKA, AVE.	26 803G N. N. R. R. F. J. P. A. F. L. S.	ASKA	4. FEI Number 59 3451470	Applied For Not Applicable
21 Fanna , Et 3300 Suite, Apt. #, etc.	Suito, Apt. #, etc.	33407	5. Certificate of Status Desired	CQ 75 Additional
22	27		5. Certificate of Status Desired	Fee Required
City & State  23 TAMPA	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	7ip	Country	8. This corporation owes or has paid th	
24 33 604 25 HIUSE	OK. 29 33604	30 HILLS.	Personal Property Tax due June 30.	☐ Yes ☐ No
	urrent Registered Agent	B1 Name	10. Name and Address of New Register	ered Agent
STEPHAN, PATRICIA A				
16008 GATWICK COURT TAMPA FL 33647		82 Street Add	Iress (P.O. Box Number is Not Acceptable)	A AVE
TAMPA PE 33047		83	a in the prior.	// // /
		84 City		<b>85</b> Zip Code
				FL 33604
<ol> <li>Pursuant to the provisions of Sections 60 office or registered agent, or both, in the</li> </ol>	State of Florida, Such change was at	uthorized by the corpora	poration submits this statement for the purpo ition's board of directors. I hereby accept the	se of changing its registered appointment as registered
agent. I am temiliar with, and accept the	- 7		11	100
SIGNATURE Signature, typied or priviled name of regular	o L	185 Rug	ared when reingrang) DA	7/78
	S AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE PRESIDENT	DELETE	1.1 TITLE		L Change  Addition
NAME JOHNR STEP	PHAN	1.2 NAME		
STREET ADDRESS 8029 N. NEAR CITY-ST-ZIP THMPH FL.	ASKA HIC	1.3 STREET ADDRESS		
TITLE DOTELLA STE	DELETE	2.1 TITLE		Change Addition
NAME SEC. ITRES.		2.2 NAME		
STREET ADDRESS 8029 N. NEB	·	2 3 STHEET ADDRESS		
CITY-ST-ZIP TAMPA. FL	35604 DELETE	2 4 CITY - ST - ZIP		Channe Addition
TITLE NAME	☐ DELETE	3 1 TITLE 3 2 NAME		Change    Addition
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4. CITY - ST - ZIP		
TITLE	DELETE	4.1 TITLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP	DELETE	4.4 CITY - ST - ZIP		Change Addition
TITLE NAME	ב יייניניני	5.1 TITLE 5.2 NAME		L Change L Augusten
STREET ADDRESS		5.3 STREET ADDRESS		
City-St-ZiP		5.4 CITY- ST - ZIP		
TITLE	DELETE	6.1 TITLE		Change Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
14. I hereby certify that the information suppl	ied with this filing dons not qualify for	64 City-St-ZiP	Section 119.07(3)(i). Florida Statutes + furth	er certify that the information
indicated on this approximation output	montal named report is true and cook	rote and that my signat	ire chall have the serve local affect as if man	to under eath; that I am an

officer or director of the corporation of 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.