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

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthaga

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # P97000088683 (2)

BANANA PRINTING INC.

## **FILED** Mar 03 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						( 1881188: 116 1811) 14811 88111 88111 88111 88191 18181 18119 81191 18168 1111 1881	
152 8TH AVE. SW 152 8TH AVE. SW							
LARGO FL 33770		LARGO FL 33770				-	DO MOT WOITE IN THE COMO
						<u> -</u>	DO NOT WRITE IN THIS SPACE
						*	3. Date Incorporated or Qualified
6 Bringinal D	lace of Business	2a. Mailing Address					10/13/1997 4. FEI Number   Applied For
_	ace of Business	26				"	59-3476276 Not Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.					60 7E 4
22	n, 010.	27				6	5. Certificate of Status Desired Fee Required
City & State	9	City & State				1	6. Election Campaign Financing \$5.00 May Be
23		28				`	Trust Fund Contribution   Added to Fees
Zip Country		Zip Country					8. This corporation owes or has paid the current year Intangible
24	25	29	30	آه		]	Personal Property Tax due June 30. X Yes No
	9. Name and Address of Current	Registered Agent				1(	10. Name and Address of New Registered Agent
` vo	LLENTINE, SUZANNE	•		61	Name		
	8TH AVE. SW			82	Street Ad	Address (P.O. Box Number is Not Acceptable)	
	RGO FL 33770				011001710		
				83			
				84	City		85 Zip Code
							FL   S   Z   D   C   C   C   C   C   C   C   C   C
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, typod or printed name of registered agent and life if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE							
				d Age	ni signature rec	equired who	
12. TITLE		DELETE	13. 1.1 Tr	TI E			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition
NAME	PRESIDENT LOUISING		1.2 N/				
NAME	SUZANNE VOLLENTINE 152 84 AVE SW				4 DADEGO		
STREET ADDRESS	LARGO, FL 33770		1.3 STREET ADDR 1.4 City - St - Zip				
CITY-ST-ZIP TITLE	MKGU, FL 33770	DELETE	2.1 TI		1-ZIP		☐ Change ☐ Addition
NAME			2.2 NAME 2.3 STREET ADDRESS				
STREET ADDRESS					- 1		'
CITY-ST-ZIP TITLE	-	DELETE	2. 4 CITY 3.1 TITLE		31-ZIF		Change Addition
NAME			3.2 N/				
STREET ADDRESS					ADDRESS		
			3.4. CITY-ST-ZIP				
CITY-ST-ZIP TITLE		☐ DELETE	4.1 70		01 - 41F		☐ Change ☐ Addition
NAME			4.2 N				
					ADDRESS		
STREET ADDRESS							
CITY-ST-ZIP TITLE		DELETE		4.4 CITY - ST - Z 5.1 TITLE			☐ Change ☐ Addition
NAME			5.2 N/		}		tame County State
1					ADDRESS		
STREET ADDRESS							
CITY-ST-ZIP TITLE		DELETE	5.4 CI 6.1 TI		1-21		☐ Change ☐ Addition
	1		6.2 N/		1		
NAME .					ADDDECC		<b>'</b>
STREET ADDRESS	*				ADDRESS		
CITY-ST-ZIP			6.4 CI	11.5	1-ZIP		410 07(0)() [1-4] Out to 16 the codife that the information

14. Thereby 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.

11-11.98 813 581 HADA