T. PETERSBURG PL 30764       ST. PETERSBURG PL 30764023         2. Principal Place of Puigness       40100	<ol> <li>Entity Name</li> </ol>	MENT # <b>P980000</b> access distributorship				Apr 26, Secret	<b>FILED</b> <b>2000 8</b> <b>ary of S</b> 0 90045 049 ***			
The PETERSBURG FL 33764       ST. PETERSBURG FL 33764 (23)         2. Principal Place of Business AD ID	rincipal Place	e of Business	Mailing Address							
Proposed Place of Placeness     Automatic Placeness     Automat				1023						
HOID       W. Statk       Statk       Hoid	. PETENSBUN	10 FL 33/04	SI. PETERSBURG PL SS/104	1025						
HOLD       W. Statk       Statk       Hold       Hold       Hold       Applie         Suite, Apt. #, etc.       Suite, Apt. #, etc.       Suite, Apt. #, etc.       Do Not Write IN THIS Mark and	Dringing D	loss of Pusiessa	3 Mailing Addross							
Phy & State       4. FEL Number       59-3528776       Applie         Zip       33003       Provide Status Desired       50.0752       Address       50.0014       <	4010	W. State	4010 W.S	ale St.			I TANKA TANÀN ANNA ANA ANA	I ANTER IN IN IN I		
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2 <sup>10</sup> 30001       2 <sup>10</sup> 30004       2 <sup>10</sup> 30004	City & State	no Fly	City & State		<b>4.</b> F	El Number 59-352877	6 -	Applied For Not Applicable		
P33/001       H1 ISD/01/015A       232/009       H1 ISD/01/015F       S. Odi Illicate of status Databability in the status Databability in the status of Required Agent       T. Name and Address of New Registered Agent         6. Name and Address of Curfent Registered Agent       7. Name and Address of New Registered Agent       7. Name and Address of New Registered Agent         HOLCOMB, VICTOR W       415 SOUTH HYDE PARK AVENUE       Name       Street Address (PO, Box Number is Not Acceptable)         The above named entity subm ts this statement for the purpose of changing its registered agent, or both, in the State of Florida.       City       FL       Zip Code         GNATURE       Street Address (PO, Box Number is Not Acceptable)       DME       DME       City       FL       Zip Code         GNATURE       Street Address (PO, Box Number is Not Acceptable)       DME       DME       City       FL       Zip Code         The above named entity subm ts this statement for the purpose of changing its registered differ or registered agent, or both, in the State of Florida.       ME       DME       City       Tust Fund Contribution       State Address (PO, O, D, N, M,				Country (						
Name         HOLCOMB, VICTOR W 415 SOUTH HYDE PARK AVENUE TAMPA FL 33606         Street Address (P.O. Box Number is Not Acceptable)         City       FL       Zip Code         City       FL       Ditt         Signature, typed or prived rame of registered agent and tell application       Inter equiption when rematching)       DAtter         This corporation is eligible to satisfy its Intangible Tax flips requiptivement and elects to do so.       After MAY 1; 2000 Fee will be \$550.00 Make Check Payable to Department of State       10. Election Campaign Financing Trust Fund Contribution.       Added to I         Nome       Signature, typed or prived #450       Thit E MAKE       Inthe Make       ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	330		33609	[HISDOROUS			Fee Req			
415 SOUTH HYDE PARK AVENUE TAMPA FL 33606       City       FL       Zip Code         City       FL       Zip Code         The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.       GMATURE         GNATURE       Signature, hyped or privated agent and tell applicable       (NOTE: Registered Agent signature inquired when releatating)       DMTE         This corporation is eligible to satisfy its Intangible       FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State       10. Election Campaign Financing Trust Fund Contribution.       \$5.00 Action to State         .       OFFICERS AND DIRECTORS       12.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN Make Check Payable to Department of State       Intellement of the state of Florida.         .       OFFICERS AND DIRECTORS       12.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN Make Check Payable to Department of State       Intellement of the state of Florida.         .       OFFICERS AND DIRECTORS       12.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN Make Check Payable to Department of State       Intellement of the state of Florida.         .       OFFICERS AND DIRECTORS       12.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN Make Check Payable to Department of State       Intellement of the state of Florida.         .       NARE       STRET ADDRESS ST. PETERSBURG FL 33764		6. Name and Address of Current H	Registered Agent	Name	7. N	ame and Address of New P	legistered Ageni			
TAMPA FL 33606         City       City <th co<="" td=""><td colspan="3">HOLCOMB, VICTOR W</td><td>Street Addres</td><td colspan="5">Street Address (P.O. Box Number is Not Acceptable)</td></th>	<td colspan="3">HOLCOMB, VICTOR W</td> <td>Street Addres</td> <td colspan="5">Street Address (P.O. Box Number is Not Acceptable)</td>	HOLCOMB, VICTOR W			Street Addres	Street Address (P.O. Box Number is Not Acceptable)				
City     FL     Zip Code       The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.     GNATURE     City     FL     Zip Code       GNATURE     Signature, typed or printed name of registered agent and left if applicable     (NOTE: Registered Agent signature registered agent, or both, in the State of Florida.     DATE       GNATURE     Signature, typed or printed name of registered agent and left if applicable     (NOTE: Registered Agent signature registered agent, or both, in the State of Florida.     DATE       This corporation is eligible to satisfy its Intangible     Tax filing requirement and elects to do so.     After MAY 1, 2000 Fee will be \$550.00     10. Election Campaign Financing     \$5.00 N       City     OFFICERS AND DIRECTORS     12.     ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN       IL     D     Belete     ITLE     MAME       MeE     Signature, typed of printed name of registered Agent signature registered A										
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ITY-ST-ZIP CITY-ST-ZIP 3. 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 inform	1. TILE AME TREET ADDRESS ITY-ST-ZIP TILE AME TREET ADDRESS ITY-ST-ZIP TLE AME TREET ADDRESS ITY-ST-ZIP TLE AME TREET ADDRESS ITY-ST-ZIP TLE AME TREET ADDRESS ITY-ST-ZIP TLE AME TREET ADDRESS ITY-ST-ZIP TLE AME TREET ADDRESS ITY-ST-ZIP	OFFICERS AND I OFFICERS AND I D KEVORKIAN, JAKE IV 2860 SCHERER DRIVE #650 ST. PETERSBURG FL 33764 D HARPER, WILLIAM H 2860 SCHERER DRIVE #650 ST. PETERSBURG FL 33764	Make Check Payable DIRECTORS	e to Department of \$ 12. 111LE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	State	Trust Fund Contributio	n. Ad	ded to Fees ORS IN 11 ge  Addition ge  Addition ge  Addition ge  Addition ge  Addition		