FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -3 PM 3:52

DOCUMENT # **S13784** **(1)**

1. Corporation Name
SAFFRONS, INC.

Principal Place of Business
2905 38 AVE. N.
ST. PETERSBURG FL 33714

Mailing Address
SAFFRONS, INC.
2905 38 AVE. N.
ST. PETERSBURG FL 33714
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/13/1990
3a. Date of Last Report: 02/10/1994

2. Principal Place of Business	2a. Mailing Address	4. FEI Number: 59-3034230	☐ Applied For ☐ Not Applicable
21 1700 PARK ST NO	26 1700 Park ST, NO		
Suite, Apt. #, etc. 22 ST. Petersburg	Suite, Apt. #, etc. 27 ST. Petersburg	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
City & State 23 FL.	City & State 28 FL.	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
Zip 24 33710 Country 25 PINELLAS	Zip 29 33710 Country 30 Pinellas	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent

JAMES, EDYTH C.
6501 34TH TERRACE NORTH
ST. PETERSBURG FL 33714

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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 Edyth C James 3/24/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	11 TITLE: PD. TD	☒ Change ☐ Addition
NAME	JAMES, EDITH C.	12 NAME: Edyth C James	
STREET ADDRESS	6501 34TH TERR N	13 STREET ADDRESS: 6501 34 TER. NO	
CITY-ST-ZIP	ST PETERSBURG FL	14 CITY-ST-ZIP: ST. Petersburg FL. 33710	
TITLE	SVD	21 TITLE: SVD	☑ Change ☐ Addition
NAME	HILL, JACQUELINE M.	22 NAME: Leonard A Henry	
STREET ADDRESS	6501 34TH TERR N	23 STREET ADDRESS: 6501 34 Ter. NO	
CITY-ST-ZIP	ST PETERSBURG FL	24 CITY-ST-ZIP: ST. Petersburg FL. 33710	
TITLE	TD	31 TITLE: Adella Golden	☑ Change ☐ Addition
NAME	GOLDEN, ADELLA	32 NAME: no longer Hired	
STREET ADDRESS	3200 65TH WAY N	33 STREET ADDRESS:	
CITY-ST-ZIP	ST PETERSBURG FL	34 CITY-ST-ZIP:	
TITLE		41 TITLE:	☐ Change ☐ Addition
NAME		42 NAME:	
STREET ADDRESS		43 STREET ADDRESS:	
CITY-ST-ZIP		44 CITY-ST-ZIP:	
TITLE		51 TITLE:	☐ Change ☐ Addition
NAME		52 NAME:	
STREET ADDRESS		53 STREET ADDRESS:	
CITY-ST-ZIP		54 CITY-ST-ZIP:	
TITLE		61 TITLE:	☐ Change ☐ Addition
NAME		62 NAME:	
STREET ADDRESS		63 STREET ADDRESS:	
CITY-ST-ZIP		64 CITY-ST-ZIP:	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 in Section 1, or an attachment with an address.

SIGNATURE: X Edyth C James 3/24/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date (Effective 1/1/96)

0810012 CP