SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT 1996

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

DOCUMENT # S17230 (1)

1. Corporation Name

BAGGY STUFF, INC.

Principal Place of Business	Mailing Address
8100 ULMERTON RD. SUITE 5A LARGO FL 34641	8100 ULMERTON RD. SUITE 5A LARGO FL 34641

3. Date Incorporated or Qualified: 11/26/1990
3a. Date of Last Report: 05/16/1995
4. FEI Number: 59-3017251 ☐ 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt #, etc 22	Suite, Apt #, etc 27
City & State 23	City & State 28
Zip 24 Country 25	Zip 29 Country 30

9. Name and Address of Current Registered Agent

BOLES, ANTHONY
2705 BRANDON VIEW DR.
BRANDON FL 33511

10. Name and Address of New Registered Agent

81 Name: Anthony Boles
82 Street Address (P.O. Box Number is Not Acceptable): 8100 Ulmerton Road
83 Suite 5A
84 City: Largo FL 85 Zip Code: 34641

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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	P	☐ DELETE
NAME	BOLES, ANTHONY	
STREET ADDRESS	2705 BRANDON VIEW RD.	
CITY-ST-ZIP	BRANDON FL 33511	
TITLE	V	[X] DELETE
NAME	BOLES, ANTHONY	
STREET ADDRESS	2705 BRANDON VIEW RD.	
CITY-ST-ZIP	BRANDON FL 33511	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D/CEO/P	[X] Change ☐ Addition
1.2 NAME	Anthony Boles	
1.3 STREET ADDRESS	8100 Ulmerton Road, Suite 5A	
1.4 CITY-ST-ZIP	Largo, Florida 34641	
2.1 TITLE	T/S/D	☐ Change [X] Addition
2.2 NAME	Terry S. Fesperman	
2.3 STREET ADDRESS	8100 Ulmerton Road, Suite 5A	
2.4 CITY-ST-ZIP	Largo, Florida 34641	
3.1 TITLE	VP	☐ Change [X] Addition
3.2 NAME	Thomas Maddalena	
3.3 STREET ADDRESS	8100 Ulmerton Road, Suite 5A	
3.4 CITY-ST-ZIP	Largo, Florida 34641	
4.1 TITLE	VP/D	☐ Change [X] Addition
4.2 NAME	Kerry P. Kennedy	
4.3 STREET ADDRESS	8100 Ulmerton Road, Suite 5A	
4.4 CITY-ST-ZIP	Largo, Florida 34641	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

CR2E034 (3/96)

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)(k), 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: ________ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #