SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S21250

(3)

STREETERAMET, INC.

Principal Pl	ace of	Business
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Mailing Address

1500 NORTH WASHINGTON BLVD. SARASOTA FL 34236

1500 NORTH WASHINGTON BLVD. SARASOTA FL 34236

FILED Sep 19 1997 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 12/27/1990 FEI Number 09/27/1996 2a. Mailing Address 2. Principal Place of Business Applied For 21 26 65-0235527 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fee: Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name Judy Tavawalla SHUTE, JOHN R 1500 N. WASHINGTON BLVD. STO 1 CHOSTEN ROCKY POLINE PRINT SARASOTA TX 34236 R3 Suite 930 84 33607 Tampa 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE NOTE_Flogistered Agent's gnature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE Change Judy Tavawalla NAME 1.2 NAME Shute, John R 2701 North Rocky Point Drive, Suite 930 STREET ADDRESS 1500 N WASHINGTON BLVD 1.3 STREET ADDRESS Tampa, FL 33607 SARASOTA FL 34236 CITY-ST-ZIP 1.4 CITY - \$1 - Z(F TITLE ☐ DELETE Change Addition 2.1 THILE NAME 2.2 NAME SANGER, JAMES STREET ADDRESS 1600 N WASHINGTON BLVD 2.3 STREET ADDRESS SARASOTA FL 34236 CITY-ST-7(P 2.4 CITY - ST - Z#P TITLE DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREFT ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE ☐ Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE Channe 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6.1 TITLE ☐ Change 200002298312 NAME 6.2 NAME -09/19/97--01090--007 STREET ADDRESS 6.3 STREET ADDRESS ***550.00 CITY-ST-ZIP G.4 CITY - S1 - ZIP

14. I do 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 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.