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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S26795

(2)

Principal Place 14009 SILVER CLARGO FL 3464	OAK CIR	Mailing Address 14009 SiLVER OAK CIR LARGO FL 33774-2027	************	*···•					
chiloo 12 olov	•	Dalloo La sovi Valea.				Date Incorporated or Qualified 01/22/1991		e of Last R 3/1996	?eport
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	4-7-1	 	pplied For
Suite, Apt	# etc	Suite, Apt. #, etc.				59-3049792			ot Applicable
22	", CR.	27				5. Certificate of Status Desired			Additional equired
City & State	6	City & State				6. Election Campaign Financing			May Be
23		28	· · · · · · · · · · · · · · · · · · ·			Trust Fund Contribution		Added	to Fees
7 p 33'	774 Country	Zip 29	30 Co.	ıntry		6. This corporation has liability for in		ax under s] No	. 199.032,
24 00	9. Name and Address of Currer		[30]	1		10. Name and Address of New Re			
MAIS	ANO, SAM B.			61	Name			<u> </u>	· ·
14009 SILVER OAK CIR				B2	Street Addr	ress (P.O. Box Number is Not Acceptable)			
LARGO FL 34644						Auto and Automotive Au			
				63					
				B4	City		FL	85 Zp.	Code
11. Pussaant	to the provisions of Sections 607 050	2 and 607 1508. Florida Statu	ites the a	hove	-named core	oration submits this statement for the o		changing i	ts registered
office or r	egistered agent, or both, in the State m familiar with and accept the obliga	of Florida, Such change was ations of Section 607,0505, E	authorize	d by	the corporat	poration submits this statement for the p tion's board of directors. I hereby accep	t the appo	intment as	registered
SIGNATURE	The time that all design the oring	310110 01, 0001011 001.0000, 1	ionale ola	10100	•				
	Signature typed or protect norm of registered age			d Age	nt signature requir	red when reinstating)	DATE		
12.	OFFICERS AN		13.			ADDITIONS/CHANGES TO OFFIC			
Tille	MAISANO, SAM B	☐ DELETE	1.1 TI				ι	Change	Addition
NAME STREET ADURESS	14009 SILVER OAK CIR		1.2 N/		address				
CHY-ST ZiF	LARGO FL			ITY-SI					
TiTLE	T	DELETE	21 TI			:	[Change	Addition
NAME	MAISANO, SAM B.		22 N	AME					
STREET ADDRESS	14009 SILVER OAK CIR		2.3 \$1	TREET	address				
CHY-ST-ZIP	LARGO FL	Louere			T-ZIP				
TITLE NAME		DELETE	31 TI				L	Change	Addition
STREET ADDRESS			3.2 N/		ADDRESS .				
CITY - ST ZIP			3.4. C						
TIFLE		DELETE	4.1 Tr					Change	Addition
NAME			4.2 N	iame				-	
STREET ADDRESS			4.3 S	TREFT	ADDRESS				
CHY-ST-ZIP				TY - \$1	r-2(P				
THILF		DELETE	5.1 1				L	Change	Addition
NAMÉ CIDOLI ADDIGEC			5.2 N/		*DDDCCC				
STREET ADDRESS CHY-ST-ZIP				IREET. ITY - S1	ADDRESS				
JULE .		DELETE	6.1 T(_	1-41	······································		Change	Addition
NAV8			6.2 N				•		
STREET ADDRESS					ADDRE\$\$				
CITY - ST - ZIP				TY - \$1					
14. I do heret informat o I am an o appears i	by certify that the information supplier on indicated on this annual report or s flicer or director of the corporation or n Block 12 or Block 13 if changed or	d with this filing does not qua supplemental annual report is the receiver or trustee empor an attachment with an ac	lify for the true and a wered to a ldress.	exer	mption stated rate and that ute this repor	d in Section 119 07(3)(i), Florida Statutes my signature shall have the same legal 1 as required by Chapter 607, Florida S	I further of effect as i atutes; and	certify that f made und d that my r	the der oath; that name

SIGNATURE:

Ham Maisans

FILED

Mar 04 1997 8:00am

Secretary of State