FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 12 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Corporation	MENT # S6012 9 MPA ROAD, INC.	9 (1)						
Principal Place	e of Business	Mailing Address			{	EVEN FICH EVE	<u> </u>	
1831 NORTH BELCHER ROAD		1831 NORTH BELCHER ROAD						
SUITE G-3 CLEARWATER FL 34625		SUITE G-3 CLEARWATER FL 34625-1417						
OCCURRENCE !			•		3. Date Incorporated or Qualified 06/13/1991		of Last Re)/1996	eport
2. Principal Pl	lace of Business	2a, Mailing Address			4. FEI Number	1 0 0/0		plied For
21		26		 	59-3104163			t Applicable
Suite, Apt.		Suite, Apt. #, etc.		·····	5. Certificate of Status Desired		\$8.75 A Fee Re	
City & State	e	City & State			6. Election Campaign Financing	_	\$5.00	
23 Zip	Country	28	Country		Trust Fund Contribution 8. This corporation has liability for	intensible to	Added to	
24	25		30			Yes 🔲		185.032,
***	g. Name and Address of Curre				10. Name and Address of New Ro	gistered A	gent	
HAM	IMOND, JAMES M. ESQUIRE		81	Name				
		W ADDRESS:	82	Street Addre	ess (P.O. Box Number is Not Accepta	ble)		
sur t		331 N. Belcher Rd.			·			
G LE.	ARWATER FL 84815 CI	learwater, FL 3462	5 83					;
			84	City	· · · · · · · · · · · · · · · · · · ·	FL	85 Zip C	Code
44 Purcuant	to the provisions of Sections 607.05	02 and 607 1508. Florida Statute	s the shove-	named coro	oration submits this statement for the		henging its	s registered
office or r	egistered agent, or both, in the Sta	te of Florida Such change was a	uthorized by t	he corporati	ion's board of directors. I hereby acce	pt the appo	ntment as	registered
=	in tamiliai with, and accept the obli	gations of, Section 607.0500, Flor	rkia olalutes.					
SIGNATURE	Signature, typed or printed name of registered a	gent and title if applicable (NOTE	: Registered Agent	signature require	ed when reinstating)	DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI			
TITLE	PCD	☐ DELETE	1.1 TITLE			į	Change	Addition
NAME	KRIVACS, JAMES K 1831 N . Deelcher. RD G3	correction:	1.2 NAME 1.3 STREET ADDRESS					
STREET ADDRESS	CLEARWATER FL	(BELCHER)	1.4 City - ST-					
CITY-ST-ZIP TITLE	CLLARITATION	DELETE	2.1 TITLE				Change	Addition
NAME		_	2.2 NAME				•	
STREET ADDRESS			2.3 STREET ADDRESS		•			
CITY-ST-ZIP			2. 4 CITY-ST	- ZIP				
DILE		DELETE	TE 3.1 TITLE			ī	Change	Addition
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET A	ł				
CITY+ST-ZIP TITLE		DELETE		- ZIP	· · · · · · · · · · · · · · · · · · ·	7	Change	Addition
NAME			4.1 TITLE 4.2 NAME			•	and oriented	Land Flagston
STREET ADDRESS			43 STREET A	DDRESS				•
CITY-ST-ZIP			4.4 CITY - ST-					
TITLE		☐ DELETE	51 TITLE			Ī	Change	Addition
NAME			52 NAME					
STREET ADDRESS			53 STREET A	DORESS				
CITY-SI-ZIF			5.4 CITY-ST-ZIP				105	1 4 4 7 7 1
TITLE	L) DELETE		6.1 TITLE			L	Change	Addition
NAME (6.2 NAME	DODECC				1
STREET AUDRESS			6.3 STREET A					
City-St-ZiP 14. I do herel	L by certify that the information supplemental by certify the supplemental by certification supplemental	ied with this filing does not qualify	6.4 CITY-ST- y for the exem	ption stated	I in Section 119.07(3)(i), Florida Statut	es. I further	certify that	the
informatio	on indicated on this annual report of	r supplemental annual report is tri or the receiver or trustee empowe	ue and accur- ered to execu	ate and that	my signature shall have the same leg t as required by Chapter 607, Florida	al effect as i	if made und	der oath; that

JAMES K. KRIVACS 813/791-7556 2/7/97 SIGNATURE: