

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 561827
1. Corporation Name
GINPRO, Inc.

Principal Place of Business
114 Hampton Circle
Jupiter, FL 33458

Mailing Address
Same

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

Virginia G. Swick
114 Hampton Circle
Jupiter, FL 33458

3. Date Incorporated or Qualified

June 24, 1991

3a. Date of Last Report

May, 1995

4. FFL Number

65-0268880

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. 199.042,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.06(2) and 607.15(5), 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 Sections 607.06(2), Florida Statutes.

SIGNATURE: Virginia G. Swick, Secretary

Virginia G. Swick May 23, 1996

12. OFFICERS AND DIRECTORS

TITLE	President	☐ DELETE
NAME	John N. Protaska	
STREET ADDRESS	114 Hampton Circle	
CITY-STATE-ZIP	Jupiter, FL 33458	
TITLE	Vice President	☐ DELETE
NAME	Jeffrey P. Protaska	
STREET ADDRESS	114 Hampton Circle	
CITY-STATE-ZIP	Jupiter, FL 33458	
TITLE	Secretary	☐ DELETE
NAME	Virginia G. Swick	
STREET ADDRESS	114 Hampton Circle	
CITY-STATE-ZIP	Jupiter, FL 33458	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY-STATE-ZIP	☐ Change ☐ Addition
5. TITLE	
6. NAME	
7. STREET ADDRESS	
8. CITY-STATE-ZIP	☐ Change ☐ Addition
9. TITLE	
10. NAME	
11. STREET ADDRESS	
12. CITY-STATE-ZIP	☐ Change ☐ Addition
13. TITLE	
14. NAME	
15. STREET ADDRESS	
16. CITY-STATE-ZIP	☐ Change ☐ Addition
17. TITLE	
18. NAME	
19. STREET ADDRESS	
20. CITY-STATE-ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied to the filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this form 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 and the person or trustee or partner authorized 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 a statement with an address.

SIGNATURE: Virginia G. Swick Virginia G. Swick May 23, 1996 407-743-6444

CR2E034 (12/95)