

# 563023

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800318225498

SHEAR, NEWMAN, HAHN & ROSENKRANZ  
PROFESSIONAL ASSOCIATION  
ATTORNEYS AT LAW

RICHARD W. BYLER  
WELDON EARL BRENNAN  
GLENN M. BURTON  
JEFFREY DREW BUTT  
DEBORAH SULLIVAN DAVIS  
SCOTT P. DUSTASIO  
MARILYN DRIVAS  
FRANCES G. FERNANDEZ  
JAMES R. FREEMAN  
WILLIAM E. HAHN  
THOMAS J. KENNEDY  
LEE A. MILLER  
JERRY L. NEWMAN  
MARK J. RAGUSA  
STANLEY W. ROSENKRANZ  
KELLY JO SCHMIEDT  
L. DAVID SHEAR

863023

ENTERPRISE PLAZA  
701 EAST KENNEDY BOULEVARD  
SUITE 1000  
POST OFFICE BOX 2378  
TAMPA, FLORIDA 33601  
(813) 226-8530  
FAX (813) 221-9122

JOHN G. PARÉ  
OF COUNSEL

June 24, 1991

Florida Department of State  
Division of Corporations  
409 East Gaines St.  
Tallahassee, FL 32301

RE: INKWOOD INCORPORATED

Dear Sir or Madam:

Enclosed please find the following:

1. Executed original and executed copy of the Articles of Incorporation of Inkwood Incorporated;
2. Acceptance of Registered Agent; and
3. Check in the amount of \$122.50 for the filing, certified copy and registered agent designation fees.

Please process the enclosed documents at your earliest opportunity and return the certified copy of the Articles of Incorporation to my attention.

Thank you for your assistance. Please do not hesitate to call me if you have any questions.

Yours truly,

*Marilyn Drivas*

Marilyn Drivas

MD:jw/43048

Encls.

cc: James R. Freeman, Esq.  
Carla Jimenez

FILED  
SI JUN 26 AM 11:17  
DIVISION OF STATE  
TALLAHASSEE, FLORIDA

*6/24/91*  
*863023*

**ARTICLES OF INCORPORATION**  
**OF**  
**INKWOOD INCORPORATED**

FILED  
91 JUN 26 AM 11:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned, acting as incorporators of INKWOOD INCORPORATED, under the Florida Business Corporation Act, adopt the following Articles of Incorporation.

**ARTICLE I. NAME**

The name of the Corporation is:

INKWOOD INCORPORATED

**ARTICLE II. COMMENCEMENT OF EXISTENCE**

The existence of the Corporation will commence on the date of filing of these Articles of Incorporation by the Department of State of the State of Florida.

**ARTICLE III. PURPOSE**

This Corporation may engage in any activity or business permitted under the laws of the United States and Florida, including, but not limited to, the sale of books, tapes and related materials.

**ARTICLE IV. DURATION**

The term of existence of the Corporation is perpetual.

**ARTICLE V. AUTHORIZED SHARES**

The maximum number of shares that the Corporation is authorized to have outstanding at any time is 50,000 shares of Common Stock having a par value of \$1.00 per share. The Board of Directors may authorize shares to be issued for any consideration described in Section 607.0621, Florida Statutes, or otherwise provided by law.

**ARTICLE VI. PREEMPTIVE RIGHTS**

Each shareholder, upon the Corporation's sale for cash of any stock (whether or not presently authorized) of the same kind, class, or series as that which such shareholder already holds, shall have the right (subject to adjustment to avoid the issue of fractional shares) to purchase such shareholder's pro rata share of that stock at the price at which it is offered to others. This right shall be deemed waived by any shareholder of said kind, class, or series who does not exercise it and pay for the stock preempted within thirty (30) days of the shareholder's receipt of a notice in writing from the Corporation inviting said shareholder to exercise the right.

**ARTICLE VII. REGISTERED AND PRINCIPAL OFFICE AND REGISTERED AGENT**

The street and mailing address of the principal office of the Corporation is 4414 W. San Carlos, Tampa, Florida 33629-5544. The initial registered office of the Corporation is 201 E. Kennedy Blvd., Suite 1000, Tampa, FL 33602. The name of the Corporation's initial registered agent at the registered office is James R. Freeman.

**ARTICLE VIII. INITIAL BOARD OF DIRECTORS**

The Corporation shall have 2 directors initially. The number of directors may be either increased or diminished from time to time as provided in the Bylaws, but shall never be less than one. The names and street addresses of the initial directors are:

<u>Name</u>	<u>Address</u>
Carla Jimenez	4414 W. San Carlos Tampa, FL 33629-5544
Leslie Anne Reiner	903 S. Fremont Ave. Tampa, FL 33606

**ARTICLE IX. INCORPORATORS**

The name and street address of the incorporators are:

<u>Name</u>	<u>Address</u>
Carla Jimenez	4414 W. San Carlos Tampa, FL 33629-5544
Leslie Anne Reiner	903 S. Fremont Ave. Tampa, FL 33606

## **ARTICLE X. SUBCHAPTER S ELECTION: MANDATORY DISTRIBUTIONS**

This Corporation intends to elect status as an S Corporation pursuant to the Internal Revenue Code of 1986, as amended (the "Code").

While its election to be an S Corporation is in effect, the Corporation shall make to each shareholder a distribution at least equal in amount to an amount equal to the estimated federal and state income taxes attributable to such shareholder's pro rata share of the Corporation's net long-term and Section 1231 capital gains and non-separately computed income as provided in Section 1366(a) of the Code. This estimated tax liability, which shall be computed by the accountant who regularly prepares the Corporation's tax returns, shall be computed on the basis of the highest marginal rate applicable to individuals on capital gains and other taxable income for the taxable year in question. Unless prevented from making any distributions under applicable state law, or the Shareholders unanimously otherwise agree, the total amount of the minimum mandatory dividend required by this Section shall be declared and paid no later than March 15 of the calendar year following the close of the Corporation's taxable year. The total pro rata distributions already made to the Shareholders during the applicable taxable year of the Corporation shall be taken into account in determining the amount, if any, of additional distributions after the end of such year that must be made by March 15th in order to meet the requirements of this Section.

## **ARTICLE XI. BYLAWS**

Either the Board of Directors or the shareholders may adopt, alter, amend, or repeal bylaws; provided, however, the Board of Directors may not amend or repeal any bylaw adopted by the shareholders if the shareholders specifically provide that the bylaw is not subject to amendment or repeal by the Board of Directors.

## **ARTICLE XII. AMENDMENTS**

The Corporation reserves the right to amend, alter, change or repeal any provision in these Articles of Incorporation in the manner prescribed by law, and all rights conferred on shareholders are subject to this reservation; provided, however, that the unanimous consent of the shareholders entitled to vote is required to amend Article X of these Articles of Incorporation. These Articles may be amended prior to the issuance of shares of the Corporation by the unanimous approval or consent of the Board of Directors. Thereafter, every amendment shall be effected in such manner as may be provided by law.

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation this 21<sup>st</sup> day of June, 1991.

Carla Jimenez  
Carla Jimenez  
Incorporator

Leslie Anne Reiner  
Leslie Anne Reiner  
Incorporator

STATE OF FLORIDA  
COUNTY OF HILLSBOROUGH

21 The foregoing instrument was acknowledged before me this day of June, 1991 by Carla Jimenez.

Suzan D. Jones  
Notary Public

My Commission Expires:  
(Affix Notarial Seal)

Notary Public State of Florida at Large  
My Commission Expires June 2, 1993.  
SUZAN D. JONES

STATE OF FLORIDA  
COUNTY OF HILLSBOROUGH

21 The foregoing instrument was acknowledged before me this day of June, 1991 by Leslie Anne Reiner.

Suzan D. Jones  
Notary Public

My Commission Expires:  
(Affix Notarial Seal)

Notary Public State of Florida at Large  
My Commission Expires June 2, 1993.  
SUZAN D. JONES

ACCEPTANCE OF REGISTERED AGENT OF  
INKWOOD INCORPORATED

Having been named to accept service of process for INKWOOD INCORPORATED, at the place designated in the Articles of Incorporation, I agree to act in this capacity and agree to comply with the provisions of §48.091 and §607.0505 Fla. Stat.

  
JAMES R. FREEMAN

FILED  
91 JUL 25 AM 11:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**2ND NOTICE FILE NOW! CORPORATION WILL BE DISSOLVED ON OR AFTER OCTOBER 7, 1992.**



ANNUAL REPORT  
1992

STATE OF FLORIDA  
DEPARTMENT OF REVENUE  
TAMPA, FLORIDA 33609

STATE OF FLORIDA  
DEPARTMENT OF REVENUE  
TAMPA, FLORIDA 33609

**FILING FEE \$61.25 Make Payable To Secretary of State**

1. Name and Mailing Address of Corporation: **DOCUMENT #S63023 (3)**

**INWOOD INCORPORATED  
4414 W SAN CARLOS ST  
TAMPA FL 33629-5544**

2. Name of the corporation as it appears on the public records. The NAME of the corporation changed only by filing an amendment.

21. Mailing Address: **216 SOUTH ARMENIA AVE.**

22. Post Office:

23. City and State: **TAMPA FL** 24. Zip Code: **33609**

3. State incorporated or qualified in: **FL** Date: **06/26/1991**

4. Date of incorporation: **NA**

5. Filing Fee: **59-3072632**

6. Filing Fee Applied For: **\$8.75**

7. Names and Street Addresses of Each Officer and Director (Do not use any information that could give away indirect information.)

1. Title	2. Name of Officer and Director	3. Street Address (Do NOT check for mail forwarding)	4. City and State
D/P	JIMENEZ, CARLA	4414 W SAN CARLOS	TAMPA, FL
D/V	REINER, LESLIE ANNE	903 S FREMONT AVE.	TAMPA, FL

**REGISTERED AGENT INFORMATION**

7. Name and Address of Current Registered Agent:  
**FREEBAM, JAMES R.  
201 E KENNEDY BLVD.  
SUITE 1000  
TAMPA, FL 33602**

8. Name and Address of the Agent for Service:  
81. Name:  
82. Address:  
83. City and State:  
84. Zip Code:  
85. State: **FL**

9. Does this corporation have any outstanding federal or state tax liabilities? Yes  No

10. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes  No

11. SIGNATURE: *Carla Jimenez* Director & President. Date: **Sept 28, 1992**  
813-253-2638

12. Should you wish to contribute to the Election Campaign Financing Trust Fund, check the box and include an additional \$5.00 to the filing fee.



SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER JULY 28, 1993.  
AMOUNT DUE ON OR BEFORE 7 DAYS: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

APPROVED  
AND  
FILED

98 JUN 23 AM 12:40

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION  
ANNUAL REPORT  
1993



FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
CORPORATION REGISTRATION

1. Name of My Florida Corporation: **INWOOD INCORPORATED**  
216 S ARMENIA AVE  
TAMPA FL 33609  
DOCUMENT # **983023** (3)

3. Date of Report: **08/26/1991** to **10/05/1992**

4. FILING FEE: **\$225.00**  
Annual Report \$61.25 + \$138.75 Corporation Supplemental Fee + \$25.00 Late Fee  
**MAKE CHECK PAYABLE TO DEPARTMENT OF STATE**

4. Check Number: **59-3072632**

2. Mailing Address:  
21: **216 S ARMENIA AVE**

2a. Principal Place of Business:  
26: **216 S ARMENIA AVE**

5. Amount of Report Fee: **\$8.75**

22: **TAMPA FL**

27: **TAMPA FL**

6. Amount of Supplemental Fee: **\$5.00** May Be Added to Fees

23: **33609**

28: **33609**

7. Amount of Supplemental Fee: **\$138.75** Supplemental Fee Not Required

24: **33602**

29: **33602**

8. Name of Current Registered Agent: **FREEMAN, JAMES R.**

9. Name and Address of Current Registered Agent:  
**FREEMAN, JAMES R.**  
**201 E KENNEDY BLVD.**  
**SUITE 1000**  
**TAMPA FL 33602**

10. Name and Address of New Registered Agent:  
81:  
82:  
83:  
84:  
85:  
**FL**

11. Description of Changes in Officers and Directors:  
12. Officers and Directors:  
13. Shareholders:

Table with 2 columns: Name, Address, Title. Includes entries for Jimenez, Carla and Retner, Leslie Anne.

Table with 2 columns: Name, Address, Title. Includes handwritten entries 'D/V' and 'D/P' with associated numbers.

14. SIGNATURE: *[Signature]* **Carla Jimenez** Director/President  
June 21, 1993 (813) 253-2648

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

CORPORATION  
ANNUAL REPORT  
1994



STATE DEPARTMENT OF STATE  
CORPORATION DIVISION  
TAMPA, FLORIDA 33602

MOVED  
AND  
FILED  
MAY - 1 PM 1:10  
SECRETARY OF STATE  
TAMPA, FLORIDA

DOCUMENT #  
S63023 (3)

INCORPORATED  
BROOKWOOD INCORPORATED

Home Office  
216 S ARMBRAN AVE  
TAMPA FL 33608

Principal Place of Business  
216 S ARMBRAN AVE  
TAMPA FL 33608

DO NOT WRITE IN THIS SPACE

21. Mailing Address  
22. City & State  
23. Zip  
24. County

25. Principal Place of Business  
26. City & State  
27. Zip  
28. County

3. Date Incorporated or Organized: 06/28/1991  
3a. Date of Last Renewal: 06/28/1993  
4. FID Number: 59-3072832  
5. Certificate of Status Desired: S675  
6. Nonprofit Exempt from \$126.75 Supplemental Fee  
7. The corporation is not a charitable organization under Florida Statutes

9. Name and Address of Current Registered Agent  
FREEZMAN, JAMES R.  
201 E KENNEDY BLVD.  
SUITE 1000  
TAMPA FL 33602

10. Name and Address of New Registered Agent  
81. Name  
82. Street Address  
83.  
84. City, State, Zip

11. Pursuant to the provisions of Sections 607.01, 607.02, 607.03, 607.04, 607.05, 607.06, 607.07, 607.08, 607.09, 607.10, 607.11, 607.12, 607.13, 607.14, 607.15, 607.16, 607.17, 607.18, 607.19, 607.20, 607.21, 607.22, 607.23, 607.24, 607.25, 607.26, 607.27, 607.28, 607.29, 607.30, 607.31, 607.32, 607.33, 607.34, 607.35, 607.36, 607.37, 607.38, 607.39, 607.40, 607.41, 607.42, 607.43, 607.44, 607.45, 607.46, 607.47, 607.48, 607.49, 607.50, 607.51, 607.52, 607.53, 607.54, 607.55, 607.56, 607.57, 607.58, 607.59, 607.60, 607.61, 607.62, 607.63, 607.64, 607.65, 607.66, 607.67, 607.68, 607.69, 607.70, 607.71, 607.72, 607.73, 607.74, 607.75, 607.76, 607.77, 607.78, 607.79, 607.80, 607.81, 607.82, 607.83, 607.84, 607.85, 607.86, 607.87, 607.88, 607.89, 607.90, 607.91, 607.92, 607.93, 607.94, 607.95, 607.96, 607.97, 607.98, 607.99, 607.100

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS  
NAME: DV JIMENEZ, CARLA  
ADDRESS: 4414 W SAN CARLOS TAMPA FL  
NAME: DVP REIMER, LESLIE ANNE  
ADDRESS: 803 S FREMONT AVE. TAMPA FL

13. CHANGES TO OFFICERS AND DIRECTORS  
DIRECTOR / PRESIDENT  
33629-4544  
DIRECTOR / VICE PRESIDENT  
33106

14. I, the undersigned, being a qualified officer or director of the corporation, do hereby certify that the foregoing is a true and correct copy of the annual report of the corporation as required by law.

SIGNATURE: *Carla Jimenez* CARLA JIMENEZ April 28, 1994 \$13 253 2638

**ANNUAL REPORT  
1995**

**FLORIDA  
DIVISION OF CORPORATIONS**

**FILED**

1995 JUL 26 AM 9:10

TALLAHASSEE, FLORIDA

**DOCUMENT # S63023**

**(3)**

1. Corporation Name

**FRONWOOD INCORPORATED**

Principal Place of Business

Mailing Address

210 S ARMBRINA AVE  
TAMPA FL 33608

210 S ARMBRINA AVE  
TAMPA FL 33608

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

3a. Date of Last Report

08/26/1991

05/01/1994

4. F.F. Number

Applied For

16-3072632

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. This corporation is a

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 193(32), Florida Statutes

Yes  No

2. Principal Place of Business

2a. Mailing Address

21. State, Apt. # etc.

26. State, Apt. # etc.

23. City & State

28. City & State

24. Zip

Country

29. Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FREEMAN, JAMES R.  
201 E KENNEDY BLVD.  
SUITE 1000  
TAMPA FL 33602

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83. City

84. State

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits the 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 of Current Registered Agent and the Corporation

Signature of New Registered Agent

DATE

12. OFFICERS AND DIRECTORS

13. OFFICERS AND DIRECTORS

TITLE	DP
NAME	JIMENEZ, CARLA
STREET ADDRESS	4414 W SAN CARLOS
CITY-STATE-ZIP	TAMPA FL
TITLE	DWP
NAME	REMER, LESLIE ANNE
STREET ADDRESS	903 S FRENCH AVE.
CITY-STATE-ZIP	TAMPA FL
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

1. TITLE	VICE PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME		
3. STREET ADDRESS		
4. CITY-STATE-ZIP		
21. TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22. NAME		
23. STREET ADDRESS	811 S EDISON AVE	
24. CITY-STATE-ZIP		
31. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
32. NAME		
33. STREET ADDRESS		
34. CITY-STATE-ZIP		
41. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42. NAME		
43. STREET ADDRESS		
44. CITY-STATE-ZIP		
51. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52. NAME		
53. STREET ADDRESS		
54. CITY-STATE-ZIP		
61. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62. NAME		
63. STREET ADDRESS		
64. CITY-STATE-ZIP		

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 of this report as an attachment with an address.

SIGNATURE:

*Carla Jimenez* Carla Jimenez

7/20/95 813-253-2638

CR2034 (3/85)

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



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

FILED

95 DEC -9 AM 10:54

DOCUMENT # S63023

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

INKWOOD INCORPORATED

Business Name: **INKWOOD INCORPORATED**  
Mailing Address: **216 S ARMBRIST AVE  
TAMPA FL 33608**



REINSTATEMENT *g*

If above addresses are incorrect in any way, list through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable		3. New Mailing Office Address, if Applicable		4. Date Incorporated or Qualified To Do Business in Florida <b>08/28/1991</b>	
State Apt #, etc.		State Apt #, etc.		5. FEI Number <b>59-3072632</b>	
City & State		City & State		Applied For Not Applicable	
Zip		Zip		6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>	

7. Names and Street Addresses of Each Officer and/or Director (Florida not-profit corporations must list at least 3 directors)			
1. Titles	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
<i>VP</i>	<b>JIMENEZ, CARLA</b>	<b>4114 W SAN CARLOS</b>	<b>TAMPA FL 33629</b>
<i>VP</i>	<b>REIMER, LESLIE ANNE</b>	<b>811 S EDISON AVENUE</b>	<b>TAMPA FL 33609</b>
			<b>300002026253--8</b>
			<b>12/11/96-01068-017</b>
			<b>375.00 375.00</b>

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
<b>FREEMAN, JAMES R. 291 E KENNEDY BLDG. SUITE 1000 TAMPA FL 33602</b>		Name Street Address (P.O. Box Number is Not Acceptable) State Apt #, Etc. City	
		State <b>FL</b> Zip Code	

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.  
Signature of Registered Agent: *James R. Freeman* Date: **12/3/96**  
REGISTERED AGENT MUST SIGN

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes  No  (See other side for information or intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 507 or 517, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0201 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(b), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as I made under oath.  
SIGNATURE: *Carla Jimenez* Date: **12/3/96** 813.  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone # **253-2268**