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Mar 25 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S80919 (1)
1. Corporation Name

SOHACKI INDUSTRIES INC.

Principal Place of Business Mailing Address

**4549-21 ST. AUGUSTINE RD.
JACKSONVILLE, FL. 32207
us**

3. Date Incorporated or Qualified **09/18/1991** 3a. Date of Last Report **04/25/96**

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21. State, Apt. #, etc.	26. Suite, Apt. #, etc.	59-3090535	Not Applicable
22. City & State	27. City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23. Zip	28. JACKSONVILLE, FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24. Country	29. 32207	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	☒ Yes ☐ No
	30. USA		

9. Name and Address of Current Registered Agent

**KING, DAVID A.
ATTORNEY AT LAW
1416 KINGSLEY AVE.
ORANGE PARK FL. 32073**

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	FL

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, and I am aware of, and accept the obligations of, Sections 607.0505, Florida Statutes.

SIGNATURE		DATE	
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1 NAME	SOHACKI, THOMAS J.	13.1 TITLE	D, P, S
12.2 STREET ADDRESS	8225 GLASGOW CT.	13.2 NAME	
12.3 CITY-STATE-ZIP	JACKSONVILLE, FL. 32244	13.3 STREET ADDRESS	
12.4 CITY-STATE-ZIP		13.4 CITY-STATE-ZIP	
12.5 NAME	SOHACKI, KENNETH A.	13.5 TITLE	D, T
12.6 STREET ADDRESS	5105 ROBERT SCOTT DR. N.	13.6 NAME	
12.7 CITY-STATE-ZIP	JACKSONVILLE, FL. 32207	13.7 STREET ADDRESS	
12.8 CITY-STATE-ZIP		13.8 CITY-STATE-ZIP	
12.9 NAME	D'ELIA JOSEPH J.	13.9 TITLE	D, VP
12.10 STREET ADDRESS	14389 FALAN CT.	13.10 NAME	
12.11 CITY-STATE-ZIP	JACKSONVILLE, FL. 32223	13.11 STREET ADDRESS	
12.12 CITY-STATE-ZIP		13.12 CITY-STATE-ZIP	
12.13 NAME		13.13 TITLE	
12.14 STREET ADDRESS		13.14 NAME	
12.15 CITY-STATE-ZIP		13.15 STREET ADDRESS	
12.16 CITY-STATE-ZIP		13.16 CITY-STATE-ZIP	
12.17 NAME		13.17 TITLE	
12.18 STREET ADDRESS		13.18 NAME	
12.19 CITY-STATE-ZIP		13.19 STREET ADDRESS	
12.20 CITY-STATE-ZIP		13.20 CITY-STATE-ZIP	

14. I, the undersigned, 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 furnished 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 on Block 12 or Block 13 of this filing, or on an attachment with an address.

SIGNATURE: *Thomas J. Sohacki* 3/18/97 (904) 739-6055
THOMAS J. SOHACKI, DIRECTOR/PRESIDENT

CR2E034 (9/96)