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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

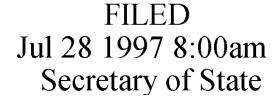
Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V03906

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ARK	ENTERPRISES,	INC.	



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Principal Place of Business		Mailing Addre	Mailing Address			T 1889) OTTOIT ORIGINATION TO THE SOURCE OF STATE OF STAT		
1336 SEVEN SPRINGS BLVD. NEW PORT RICHEY FL 34855 US		SUITE 400	30 NORTH RING AVE. SUITE 400 TARPON SPRINGS FL 34689-4304					
		Trail ON OF THE	100 12 01005 10	<b>A</b> AT		3. Date Incorporated or Qualified 12/27/1991	3s. Date of Last Report 05/01/1996	
· '	Place of Business	2a. Mailing Ad	ldress			4. FEI Number	Applied	For
21		26				59-3104700	Not App	olicable
Suite, Apt.	#, etc.	Suite, Apl.	#, eta.	,		5. Certificate of Status Desired	\$8.75 Addition	onal
22		27				Commodition of blands (Scareb	Fee Required	ď
City & Stat	te	City & Stat	c			6. Election Campaign Financing	\$5.00 May I	Ве
23		28	- · <del></del>			Trust Fund Contribution	Added to Fee	
Zip	Country	Zιρ		Country	1	8. This corporation has trability for in		032,
24	25	[29]	30			Florida Statutes		
	9. Name and Address of Curre	ent Hegistered Agen	<u> </u>	81	None	10. Name and Address of New Reg	istered Agent	
	MIS, GEORGE N.			81	Name			
	NORTH RING AVENUE			82	Street A	ddress (P.O. Box Number is Not Acceptable	e)	
	TE #400				ļ			
į TAR	RPON SPRINGS FL 34689			83				
				84	City		FL 85 Zip Code	<b>-</b>
office or a agent. I a SIGNATURE	registered agent, or both, in the Stat am familiar with, and accept the obti Signature, typed or printed name of registered a	le of Florida, Such ch. gations of, Section 60 gent and little? applicable	ange was autho 07 0505, Florida (NOTE: Reg	orized by Statute:	y the corpo s.	orporation submits this statement for the profession's board of directors. I hereby acceptioning when reinstating)	the appointment as regist	tered
12.	DPST OF TOERS A	ND DIRECTORS		13.	т	ADDITIONS/CHANGES TO OFFIC		
TITLE	WICKS, MARK R.	Ц		1 1 THLE			L Change L	Addition
NAME	6867 SAN JOSE LOOP			12 NAME				
STREET ADDRESS	NEW PORT RICHEY FL 3465	£		1 3 STREET				
CITY-ST-ZIP	NEW FORT MORE! FL 3403			14 CHY-5	1 - ZIP			¥ 1 P.1
TITLE		Ш		21 TITLE			L Change	Addition
NAME				2 2 NAME				
STREET ADDRESS				2 3 STREET				
CITY-ST-ZIP				2. 4 CITY-	ST - ZIP			N 4 422
TATLE		LJ		31 TITLE			Charige L	Addition
NAME				3 2 NAME				
STREET ADDRESS	1			3.3 STHEET				
CITY-ST-ZIP				3.4. CITY - :	51-7IF		T 65	A 4 4 7
TITLE		LJ		4.1 TITLE			☐ Change ☐ /	Addition
NAME				4. 2 NAME				
STREET ADDRESS				4.3 STREET				
CITY-ST-ZIP				4.4 CITY - S	1 - ZIP			A 1 17
TITLE		السا		5.1 TILE			Change /	Addition
NAME				5.2 NAME	1			
STREET ADDRESS				5.3 STRECT	1			
CITY-ST-ZIP				5.4 CITY - S	T-ZIP		······	
TITLE		LJ	DELETE	6.1 TITLE			☐ Change ☐ /	Addition
NAME			•	6.2 NAME				
STREET ADDRESS				6.3 STREFT	ADDRESS			
City-St-Zip				6.4 CITY - S	T-ZIP			

14. I do hereby 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 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 if changed or on an attackment with an address.