

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAY -1 AM 10:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V09264 (5)

1. Corporation Name

KIRIA, INCORPORATED

Principal Place of Business

Mailing Address

**275 34TH ST., SOUTH
ST. PETERSBURG FL 33711-1325**

**275 34TH ST., SOUTH
ST. PETERSBURG FL 33711-1325**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/24/1992

3a. Date of Last Report

05/01/1994

4. FEI Number

59-3104638

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. 193.032,
Florida Statutes

☐ Yes ☒ No

2. Principal Place of Business

21

2a. Mailing Address

26

State, Apt. #, etc.

State, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KANA, KIRIT
275 34TH ST., SOUTH
ST. PETERSBURG FL 33711-1325**

81. Name

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

83

84. City

FL

85. Zip Code

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. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

(Signature of registered agent, if registered agent is not approved)

(Signature of president or officer of corporation, if registered agent is not approved)

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1995

TITLE	DPT
NAME	KANA, KIRIT
STREET ADDRESS	275 34TH STREET, SOUTH
CITY, ST., ZIP	ST. PETERSBURG FL
TITLE	DV
NAME	KANA, BHOWAN PEMA
STREET ADDRESS	275 34TH STREET, SOUTH
CITY, ST., ZIP	ST. PETERSBURG FL
TITLE	DS
NAME	DIAH, BHULA D.
STREET ADDRESS	2327 DESOTO WAY, SOUTH
CITY, ST., ZIP	ST. PETERSBURG FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST., ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST., ZIP	

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

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 131.07(4)(b), 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, as appropriate, or as an attachment with an address.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

X 422 95
Date

X 813-327-4202
Telephone Number

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CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # V10108

(1)

For Representative Filings

JERNIGAN'S COACHES, INC.

APPROVED
FILED

STAMPED: APR 27

RECEIVED
MAY 1 1995

DO NOT WRITE IN THIS SPACE

Principal Place of Business		Mailing Address	
1302 N 9TH AVE. PENSACOLA FL 32503-5926		1302 N 9TH AVE. PENSACOLA FL 32503-5926	
2. Principal Place of Business	2a. Mailing Address		
21. State, Apt. #, City	26. State, Apt. #, City		
22. City & State	27. City & State		
23. Zip	28. Zip		
24. Country	25. Country		
29. Country	30. Country		

3. Date incorporated or created	3a. Date of last report
01/23/1992	06/15/1994
4. FFI Number	Applied For
59-3110293	Not Applicable
5. Certificate of Status Debates	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
8. The corporation has liability for intangible tax under S. 199 USCF Florida Statutes	Yes ☐ No ☐

9. Name and Address of Current Registered Agent

JERNIGAN, CURTIS
1302 N 9TH AVE.
PENSACOLA FL 32501

10. Name and Address of New Registered Agent

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 607.08(2) and 607.15(1a) Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, as 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 607.08(2) Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12a. NAME	DP JERNIGAN, CURTIS	13a. NAME	☐ Change ☐ Addition
12b. STREET ADDRESS	1302 N 9TH AVE.	13b. STREET ADDRESS	
12c. CITY, ST, ZIP	PENSACOLA FL	13c. CITY, ST, ZIP	
12d. NAME		13d. NAME	☐ Change ☐ Addition
12e. STREET ADDRESS		13e. STREET ADDRESS	
12f. CITY, ST, ZIP		13f. CITY, ST, ZIP	
12g. NAME		13g. NAME	☐ Change ☐ Addition
12h. STREET ADDRESS		13h. STREET ADDRESS	
12i. CITY, ST, ZIP		13i. CITY, ST, ZIP	
12j. NAME		13j. NAME	☐ Change ☐ Addition
12k. STREET ADDRESS		13k. STREET ADDRESS	
12l. CITY, ST, ZIP		13l. CITY, ST, ZIP	
12m. NAME		13m. NAME	☐ Change ☐ Addition
12n. STREET ADDRESS		13n. STREET ADDRESS	
12o. CITY, ST, ZIP		13o. CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and is true and correct for the corporation stated in law (see 1994/95 Florida Statutes, Chapter 607). That this information is included 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 secretary or treasurer empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of changes or additions filed with an address.

SIGNATURE:

Curtis Jernigan
SIGNATURE AND TYPED OR PRINTED NAME OF HIGH OFFICER OR DIRECTOR

4/29/94

904-4341292