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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

Socretary of State

	1996	Security.	DIVISION OF	CORPORA	11042				
DOCUI	MENT # V (37133	(8)	-	-				
•	N VENTURES, INC	C.							
0, 41,00	it veitiones, in	.							
Nivole of Diago	of Duringo		Aailing Address						
rincipa! Place			<u>u</u>						
501 e. Kenne Suite 1400	EDA BEAD:		501 E. KENNEDY BLVD. SUITE 1400						
TAMPA FL 33	602		TAMPA FL 33602			3. Date Incorporated or Qualified	3a. Date o	of Last Re	port
						05/19/1992 01/26/1995			5
. Pendipat Pl	ace of Business	⊢	Mailing Address			4. FEI Number			opplied For
Suite, Apt.	t ole	26	Suite, Apt. #, etc.			59-3235252			lot Applicable Additional
Salites, April.	r, cav.	27				5. Certificate of Status Desired			Required
City & State	E		City & State			6. Election Campaign Financing	П		May Be
3]	Gountry	28] Zip	Coun	ln/	Trust Fund Contribution 8. This corporation has liability fo			100 032
- Zq∋ µ]	25	29	1	30	·· 1		rintangibie tax s ∏No	UINTOID	100.002.
<u> </u>	9. Name and Addre		}			10. Name and Address of New	Registered A	gent	
				18	31 Name				
	, WARREN			1	32 Street Add	iress (P.O. Box Number is Not Accepta	ible)		· · · · · · · · · · · · · · · · · · ·
	ENNEDY BLVD.			- Fa	33				
SUITE 14	+00 FL 33602							11 =	
I AMILIA I	L 00002			1	Gity City		FL	85 Zip	Code
or register	rea agent, or both, in the	State of Florida, Sur	ch change was authorizi	ed by the co	rporation's boa	oration submits this statement for the pard of directors. I hereby accept the ap	pointment as r	egistered	agent. I am
familiär wi ilGNATURF	ith, and accept the obliga	itions of, Section 60 of regulate tand tild	ch change was authorizi 7.0505, Florida Statutes ifappicane INO	ed by the co	gent signature requir	and of directors. I hereby accept the ap	pointment as r	egistered	agent. I am
familiar wi	ith, and accept the obligation of the obligation of the control of the obligation of	itions of, Section 60	ch change was authorizing 2,0505, Florida Statutes If applicance INO	it Registered A	gert sgrahm requir	ard of directors. I hereby accept the ap	pointment as r	egistered	agent. I am
familiar wi SIGNATURE 12.	ith, and accept the obligation of the obligation	stions of, Section 60 officers are tradition OFFICERS AND DIRE	ch change was authorizi 7.0505, Florida Statutes ifappicane INO	ed by the co	gert sgrative requir	and of directors. I hereby accept the ap	pointment as r	egistered	agent. I am
familiär wi alGNATURF 2. Juli ame	ith, and accept the obligation of the obligation of the control of the obligation of	ofing restance the attraction 60 of the control of	ch change was authorizing 2,0505, Florida Statutes If applicance INO	IE Registered A 13. 1 1 Titl 1 2 NAM	gert sgrative requir	and of directors. I hereby accept the ap	pointment as r	egistered	agent. I am
familiar wi SIGNATURE 12. TH IAME EIBELLADORESS	Stylusies, species prosest caree. C D SAMSON, BRUCE	ofing restance the attraction 60 of the control of	ch change was authorized 2,0505, Florida Statutes at applicance INO	IE Registered A 13. 1 1 Titl 12 NAk 1.3 STR	ged sgrahze requir	and of directors. I hereby accept the ap	CATE FICERS AND I	egistered DIRECTOR Change	RS IN 12
familiär wi SIGNATUER 2. TIE IME IME ADDRESS EIY SY ZE	TAMPA FL Days and accept the obligation of the	of not percent and the officers and DIRE A. #1400	ch change was authorizing 2,0505, Florida Statutes If applicance INO	IE Regulared A 13. 1 1 Titl 12 NAA 1.3 SIR 1.4 CITA 2 1 Titl	gent signature requirements EE ME EET ADDRESS (-SI-ZIP EE	and of directors. I hereby accept the ap	CATE FICERS AND I	egistered	agent. I am
familiar wi SIGNATURI 12. THE FAME ETRELI AUDRESS DIY S7 72 THE FAME	TAMPA FL D SAMSON, BRUCE TAMPA FL D SAMSON, BRUCE SOI E KENNDEY B TAMPA FL D SAMSON, ADAJEA	of not percent and the officers and DIRE A. BLVD #1400	ch change was authorized 2,0505, Florida Statutes at applicance INO	18. Registered A. 1.1 Titl. 1.2 NAN. 1.3 STR 1.4 CIT. 2.2 NAN.	gent signature requirements EE AE EET ADDRESS (-SI-ZIP EE	and of directors. I hereby accept the ap	CATE FICERS AND I	egistered DIRECTOR Change	RS IN 12
familiar wi signaturif 2. The thelf address ofy so 729 the tame	TAMPA FL D SAMSON, BRUCE 501 E KENNDEY E TAMPA FL D SAMSON, ADAJEA 501 E KENNDEY E	of not percent and the officers and DIRE A. BLVD #1400	ch change was authorized 2,0505, Florida Statutes at applicance INO	18. Registered A. 1.1 Titl. 1.2 NAA. 1.3 STR 1.4 CIT. 2.2 NAA. 2.3 STR 2.3 STR	gent signature requirements EE ME EET ADDRESS (-S1-ZIP EET ADDRESS	and of directors. I hereby accept the ap	CATE FICERS AND I	egistered DIRECTOR Change	agent Tam RS IN 12 Addition
familiar wi SIGNATURI 12. THE FIRE LAUDRESS DIY S7 ZP THE FIRE LAUDRESS DIY S1 ZP	TAMPA FL D SAMSON, BRUCE TAMPA FL D SAMSON, BRUCE SOI E KENNDEY B TAMPA FL D SAMSON, ADAJEA	of not percent and the officers and DIRE A. BLVD #1400	ch change was authorized 2,0505, Florida Statutes at applicance INO	18. Registered A. 1.1 Titl. 1.2 NAA. 1.3 STR 1.4 CIT. 2.2 NAA. 2.3 STR 2.3 STR	gent signature requirements EE ME EET ADDRESS (-ST-ZIP EET ADDRESS (-ST-ZIP	and of directors. I hereby accept the ap	CATE FICERS AND	egistered DIRECTOR Change	RS IN 12
familiar wi signaturif 2. The theft address ofy so 729 the tame theft address ofy storp	TAMPA FL D SAMSON, BRUCE 501 E KENNDEY E TAMPA FL D SAMSON, ADAJEA 501 E KENNDEY E	of not percent and the officers and DIRE A. BLVD #1400	ch change was authorized 7.0505, Florida Statutes if application in INO COTORS DELETE	18 Registered A 13. 1 1 11/1 1 2 NAA 1.3 STR 1.4 CIT/ 2 1 11/1 2 2 NAA 2.3 STR 2.4 CIT/ 2 4 CIT/ 2 4 CIT/ 2 4 CIT/ 2 4 CIT/ 3 CIT/ 4 CI	gent signature requirements EE ME EET ADDRESS (-S1-ZIP EET ADDRESS (-S1-ZIP EET ADDRESS	and of directors. I hereby accept the ap	CATE FICERS AND	egistered DIRECTOR Change	agent Tam RS IN 12 Addition Addition
familiar wi ilignature 2. The AME TRELLADDRESS ITY ST ZIP THE TRELLADDRESS ITY ST ZIP THE	TAMPA FL D SAMSON, BRUCE 501 E KENNDEY E TAMPA FL D SAMSON, ADAJEA 501 E KENNDEY E	of not percent and the officers and DIRE A. BLVD #1400	ch change was authorized 7.0505, Florida Statutes if application in INO COTORS DELETE	18. Registered A. 13. 1 1 1111 1 1 2 NAM 1.3 SIR 1.4 CITY 2 2 NAM 2.3 SIR 2.4 CITY 3.1 HIII 3.2 NAM 3.3 NAM	gent signature requirements EE ME EET ADDRESS (-S1-ZIP EET ADDRESS (-S1-ZIP EET ADDRESS	and of directors. I hereby accept the ap	CATE FICERS AND	egistered DIRECTOR Change	agent Tam RS IN 12 Addition Addition
familiar wi SIGNATURE 2. THE THELLADDRESS	TAMPA FL D SAMSON, BRUCE 501 E KENNDEY E TAMPA FL D SAMSON, ADAJEA 501 E KENNDEY E	of not percent and the officers and DIRE A. BLVD #1400	ch change was authorized 7.0505, Florida Statutes If application (INO) CTORS DELETE DELETE	18. Registered A. 1.1 Title 1.2 NAM 1.3 STR 2.2 NAM 2.3 STR 2.4 City 3.1 Title 3.2 NAM 3.3 STF 3.4 City 3.4 Cit	Gent signature requirements EE AE EE T ADDRESS (-S1-ZIP	and of directors. I hereby accept the ap	CATE FICERS AND	OIRECTOR Change Change	Addition
familiar wi SIGNATURE 2. THE THELLADDRESS TY ST ZP THELLADDRESS TY ST ZP THE THELLADDRESS TY ST ZP	TAMPA FL D SAMSON, BRUCE 501 E KENNDEY E TAMPA FL D SAMSON, ADAJEA 501 E KENNDEY E	of not percent and the officers and DIRE A. BLVD #1400	ch change was authorized 7.0505, Florida Statutes if application in INO COTORS DELETE	18. Registered A. 1.1 Title 1.2 NAM 1.3 STR 1.4 CITL 2.2 NAM 2.3 STR 2.4 CITL 3.2 NAM 3.3 STF 3.4 CITL 4.1 TITL	Gent signature requirements LE AE EET ADDRESS (-S1-ZIP LE AE EET ADDRESS (-S1-ZIP LE AE EET ADDRESS (-S1-ZIP LE AE AE EET ADDRESS (-S1-ZIP LE AE AE AE AE AE AE AE AE AE	and of directors. I hereby accept the ap	CATE FICERS AND	egistered DIRECTOR Change	agent Tam RS IN 12 Addition Addition
familiar wi IGNATURE 2. THE AME THE LADDRESS ITY ST ZP THE THE LADDRESS	TAMPA FL D SAMSON, BRUCE 501 E KENNDEY E TAMPA FL D SAMSON, ADAJEA 501 E KENNDEY E	of not percent and the officers and DIRE A. BLVD #1400	ch change was authorized 7.0505, Florida Statutes If application (INO) CTORS DELETE DELETE	18. Registered A. 1.1 Title 1.2 NAM 1.3 STR 1.4 CITL 2.2 NAM 2.3 STR 2.4 CITL 3.2 NAM 3.3 STF 3.4 CITL 4.1 TITL 4.2 NAM 4.3 STF 4.4 CITL 4.2 NAM 4.3 STF 4.4 CITL 4.2 NAM 4.3 STF 4.4 CITL 4.4 NAM 4.3	Gent signature requirements LE AE EET ADDRESS (-ST-ZIP LE AE EET ADDRESS (-ST-ZIP LE AE AE AE AE AE AE AE AE AE	and of directors. I hereby accept the ap	CATE FICERS AND	OIRECTOR Change Change	Addition
familiar wi IGNATURE 2. THE AME THELL ADDRESS TY ST-ZIP THELL ADDRESS TY ST-ZIP THELL ADDRESS TRY ST-ZIP THELL ADDRESS TRY ST-ZIP THELL ADDRESS	TAMPA FL D SAMSON, BRUCE 501 E KENNDEY E TAMPA FL D SAMSON, ADAJEA 501 E KENNDEY E	of not percent and the officers and DIRE A. BLVD #1400	ch change was authorized 7.0505, Florida Statutes If application (INO) CTORS DELETE DELETE	18. Registered A 13. 1 1 11/1 1 2 NAM 1 3 SIR 1 4 CITY 2 1 THE 2 2 NAM 2 3 SIR 2 4 CITY 3 1 HH 3 2 NAM 3 3 SIF 4 1 HH 4 2 NAM 4 3 SIR 4 3 SIR	Gent signature requirements LE AE EET ADDRESS (-ST-ZIP LE AE AE AE AE AE AE AE AE AE	and of directors. I hereby accept the ap	CATE FICERS AND	OIRECTOR Change Change	Addition
familiar wi 2. ILE AME IRELI ADDRESS ILY ST ZP	TAMPA FL D SAMSON, BRUCE 501 E KENNDEY E TAMPA FL D SAMSON, ADAJEA 501 E KENNDEY E	of not percent and the officers and DIRE A. BLVD #1400	ch change was authorized 7.0505, Florida Statutes If application (INO) CTORS DELETE DELETE	18. Registered A 13. 1 1 11/1 1 2 NAM 1 3 SIR 1 4 CITY 2 1 THE 2 2 NAM 2 3 SIR 2 4 CITY 3 1 HH 3 2 NAM 3 3 SIF 4 1 HH 4 2 NAM 4 3 SIR 4 3 SIR	Gent signature requirements LE AE EET ADDRESS (-ST-ZIP LE AE AE EET ADDRESS (-ST-ZIP LE AE EET ADDRESS (-ST-ZIP LE AE EET ADDRESS (-ST-ZIP LE AE EET ADDRESS (-ST-ZIP	and of directors. I hereby accept the ap	CATE FICERS AND	OIRECTOR Change Change	Addition
familiar wi IGNATURE ILE THE LADDRESS ITY ST-ZIP THE LADDRESS ITY ST-ZIP	TAMPA FL D SAMSON, BRUCE 501 E KENNDEY E TAMPA FL D SAMSON, ADAJEA 501 E KENNDEY E	of not percent and the officers and DIRE A. BLVD #1400	Chichange was authorized 7.0505, Florida Statutes If anythia the NO. CHORS DELETE DELETE DELETE	18. Registered A 13. 1 1 TITI 1 2 NAM 1 3 SIR 2 4 CITY 3 1 HII 3 2 NAM 3 3 SIR 4 CITY 4 1 TITI 4 2 NAM 4 3 SIR 4 4 CITY	gent signature requirements LE AE EET ADDRESS (-ST-ZIP LE AE AE EET ADDRESS (-ST-ZIP LE AE AE EET ADDRESS (-ST-ZIP LE AE EET ADDRESS (-ST-ZIP LE AE EET ADDRESS (-ST-ZIP LE AE AE AE AE AE AE AE AE AE	and of directors. I hereby accept the ap	CATE FICERS AND	OIRECTOR Change Change Change	RS IN 12 Addition Addition Addition
familiar wi IGNATURE 2. THE COMESS THE CADDRESS TY ST-ZIP THE CADDRESS TY ST-ZIP THE CADDRESS TY ST-ZIP THE CADDRESS THE CADDRESS THE CADDRESS THE CADDRESS THE CADDRESS THE CADDRESS THE CADDRESS THE CADDRESS	TAMPA FL D SAMSON, BRUCE 501 E KENNDEY E TAMPA FL D SAMSON, ADAJEA 501 E KENNDEY E	of not percent and the officers and DIRE A. BLVD #1400	Chichange was authorized 7.0505, Florida Statutes If anythia the NO. CHORS DELETE DELETE DELETE	18. Regulared A 13. 1 1 11/1 1 2 NAM 1 3 SIR 2 4 CITY 3 1 HI 3 2 NAM 3 3 SIF 4 4 1 HI 4 2 NAM 4 3 SIR 4 4 CITY 5 1 HI 5 2 NAM	gent signature requirements LE AE EET ADDRESS (-ST-ZIP LE AE AE EET ADDRESS (-ST-ZIP LE AE AE EET ADDRESS (-ST-ZIP LE AE EET ADDRESS (-ST-ZIP LE AE EET ADDRESS (-ST-ZIP LE AE AE AE AE AE AE AE AE AE	and of directors. I hereby accept the ap	CATE FICERS AND	OIRECTOR Change Change Change	RS IN 12 Addition Addition Addition
familiar wi SIGNATURE 2. THE FAME THELL ADDRESS THY ST-ZIP THE	TAMPA FL D SAMSON, BRUCE 501 E KENNDEY E TAMPA FL D SAMSON, ADAJEA 501 E KENNDEY E	of not percent and the officers and DIRE A. BLVD #1400	Chichange was authorized 7.0505, Florida Statutes If application (INC) CHORS DELETE DELETE DELETE	18. Regulared A 13. 1 1 1111 1 2 NAM 1 3 SIR 1 4 CITY 2 1 THE 2 2 NAM 2 3 SIR 2 4 CITY 3 1 HI 3 2 NAM 3 3 SIF 4 1 HI 4 2 NAM 4 3 SIR 4 4 CITY 5 1 HI 5 2 NAM 5 3 SIR 5 4 CITY	Gent signature requirements LE AE EET ADDRESS (-ST-ZIP LE AE AE AE AE LE AE AE AE AE	and of directors. I hereby accept the ap	CATE FICERS AND	OIRECTOR Change Change Change Change	RS IN 12 Addition Addition Addition Addition
familiar wi SIGNATURE 12. THE LADDRESS SILY ST ZP SILE LAME SIRET ADDRESS SILY ST ZP SILE LAME SIRET ADDRESS SILY ST ZP SILE LAME SIRET ADDRESS SILY ST ZP SILE LADDRESS SILY ST ZP	TAMPA FL D SAMSON, BRUCE 501 E KENNDEY E TAMPA FL D SAMSON, ADAJEA 501 E KENNDEY E	of not percent and the officers and DIRE A. BLVD #1400	Chichange was authorized 7.0505, Florida Statutes If anythia the NO. CHORS DELETE DELETE DELETE	18. Regulared A 13. 1 1 1111 12 NAM 13 SIR 14 CITY 2 1 1112 22 NAM 23 SIR 24 CITY 3 1 HII 32 NAM 33 SIF 44 CITY 41 NIT 42 NAM 43 SIR 44 CITY 51 NIT 52 NAM 53 SIR 54 CITY 6 1 111	Gent signature requirements LE AE LE LE AE LE LE LE LE LE	and of directors. I hereby accept the ap	CATE FICERS AND	OIRECTOR Change Change Change	RS IN 12 Addition Addition Addition
familiar wi SIGNATURE 12. LILE VAME STREET ADDRESS CHY SY ZP BILLE VAME STREET ADDRESS CHY ST ZP LILLE VAME VAME STREET ADDRESS CHY ST ZP LILLE VAME V	TAMPA FL D SAMSON, BRUCE 501 E KENNDEY E TAMPA FL D SAMSON, ADAJEA 501 E KENNDEY E	of not percent and the officers and DIRE A. BLVD #1400	Chichange was authorized 7.0505, Florida Statutes If application (INC) CHORS DELETE DELETE DELETE	18. Registered A 13. 1 1 1111 12 NAM 13 SIR 14 CITY 2 1 1112 22 NAM 23 SIR 24 CITY 3 1 HII 32 NAM 33 SIF 44 CITY 41 NIT 42 NAM 43 SIR 44 CITY 51 NIT 52 NAM 53 SIR 54 CITY 6 1 111 62 NAM	Gent signature requirements LE AE EET ADDRESS (-ST-ZIP) LE AE AE AE AE AE AE AE AE AE	and of directors. I hereby accept the ap	CATE FICERS AND	OIRECTOR Change Change Change Change	RS IN 12 Addition Addition Addition
OF TOG STOR FAMILIES SIGNATURE STREET ADDRESS CITY STATE THE NAME STREET THE NAME STREET THE NAME STREET STATE THE NAME STREET THE NAME S	TAMPA FL D SAMSON, BRUCE 501 E KENNDEY E TAMPA FL D SAMSON, ADAJEA 501 E KENNDEY E	of not percent and the officers and DIRE A. BLVD #1400	Chichange was authorized 7.0505, Florida Statutes If application (INC) CHORS DELETE DELETE DELETE	18. Registered A 13. 1 1 11/1 1 2 NAM 1 3 SIR 1 4 CITY 2 1 11/2 2 2 NAM 2 3 SIR 2 4 CITY 3 1 HII 4 2 NAM 4 3 SIR 4 4 CITY 5 1 7/1 5 2 NAM 5 3 SIR 5 4 CITY 6 1 11/1 6 2 NAM 6 3 SIR	Gent signature requirements LE AE LE LE AE LE LE LE LE LE	and of directors. I hereby accept the ap	CATE FICERS AND	OIRECTOR Change Change Change Change	RS IN 12 Addition Addition Addition

BANNON-BILLE A. SAMSON 2/19/96 813-286-1132
RE AND TYPED ON PRINTED NAME OF SIGNING OFFICER ON DIRECTOR SIGNATURE: