FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **V41615** **(8)**

1. Corporation Name

DRAHEIM & ASSOCIATES, INC.

Principal Place of Business

115 BANDERA WAY N.E.
ST. PETERSBURG FL 33704
US

Mailing Address

C/O STEPKE ASSOCIATE
P.O. BOX 114
ALLISON PARK PA FL 15101

3. Date Incorporated or Qualified: 06/04/1992

3a. Date of Last Report: 05/01/1995

4. FEI Number: 59-3124486 — 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. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

9. Name and Address of Current Registered Agent

DRAHEIM, JOHN
115 BANDERA WAY N.E.
UNIT 110
ST PETERSBURG FL 33704

10. Name and Address of New Registered Agent

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 Section 607.0501, 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 607.0501, Florida Statutes.

SIGNATURE

DATE

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	DRAHEIM, JOHN
STREET ADDRESS	115 BANDERA WAY NE
CITY, ST, ZIP	ST. PETERSBURG FL

☐ DELETE

TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP — ☐ DELETE

TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP — ☐ DELETE

TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP — ☐ DELETE

TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP — ☐ DELETE

TITLE / NAME / STREET ADDRESS / CITY, ST, ZIP — ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY, ST, ZIP — ☐ Change ☐ Addition

21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY, ST, ZIP — ☐ Change ☐ Addition

31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY, ST, ZIP — ☐ Change ☐ Addition

41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY, ST, ZIP — ☐ Change ☐ Addition

51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY, ST, ZIP — ☐ Change ☐ Addition

61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY, ST, ZIP — ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this Report is voluntary, furnished and does not apply for the exemption stated in Section 119.07(3)(i), Florida Statutes. Further I certify that the information indicated on this 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 is added in Block 13 if an officer or director is being added.

SIGNATURE: PRESIDENT — 4/8/96 — 813-593-5099

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone

CR2E034 (12/95)