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

PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V60985

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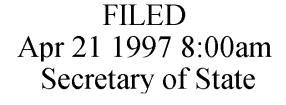
BUILDING PRESERVATION, INC.

`

Principal Place of Business

2009 E BROADWAY AVE TAMPA FL 33605 Mailing Address

2609 E BROADWAY AVE TAMPA FL 33605-4103 US





3a. Date of Last Report

08/07/1996

3. Date Incorporated or Qualified

08/31/1992

2. Principal P	Place of Business	28. Mailing Address 26. 2609 E. S	PRADULAS	4. FEI Number 59-3140486	Applied For Not Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.	ROADW AY	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat	, [~]	City & State 28 TAMOA	FL	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 7 24 336	Country	Zip 7 3.3605 3i	Country S	8. This corporation has liability for intangible Florida Statutes	tax under s. 199.032,	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent		
MUNNIGUR, ANDREW 3.			81 Name			
2309 EAST BROADWAY AVENUE			B2 Street Add	82 Street Address (P.O. Box Number is Not Acceptable)		
TAMPA FL 33605						
			83			
			84 City	FL	85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutos, the ab				poration submits this statement for the purpose o	f 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, typed or printed name of registered agent	and tile it applicable. (NOTE: F	Registered Agent signature requ	ixed when reinstating) DATE		
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12	
TITLE	P	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition	
NAME	MORRISON, ANDREW S	1	1.2 NAME		Į:	
STREET ADDRESS	2609 E BROADWAY AVE		1.3 STREET ADDRESS]:	
CITY-ST-ZIP	TAMPA FL		1.4 C(TY - S1 - Z(P			
TITLE		☐ DELFTE	2.1 TITLE		☐ Change ☐ Addition	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2. 4 CfTY-S1-ZiP			
TITLE		DELFTE	3.1 TITLE		☐ Change ☐ Addition	
NAME			3.2 NAME		ļ	
STREET ADDRESS			3 3 STREET ADDRESS			
CITY-ST-ZIP			3 4. CITY - ST - ZIP			
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CHY-S1-ZIP			
TITLE	}	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition	
NAME			5.2 NAME		Į	
STREET ADDRESS			5.3 STREET ADDRESS		1	
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		□ DEL€1E	6.1 TITLE		Change Addition	
NAME			G 2 NAME			
STREET ADDRESS		A	6.3 STREET ADDRESS			
CITY-ST-ZIP		1/1	6.4 C(TY - ST - Z(P			
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 stripped nearly formula tepon 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 of the received of usee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chartest of in a last primy int with an address.						