

FILE NOW: FILING FEE AFTER MAY 1 IS \$ 1.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF REVENUE
Sandha B. Moore
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V68747

(7)

1. Corporation Name

BOULDEX INDUSTRIES, INC.

Principal Place of Business

2211 N 38TH STREET
TAMPA FL 33605

Mailing Address

2211 N 38TH STREET
TAMPA FL 33605

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

24

25

Country

29

Zip

9. Name and Address of Current Registered Agent

CAVALIERE, THEODORE
2211 N. 38TH STREET
TAMPA FL 33605

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, I, the undersigned, being a shareholder or registered agent, or both, in the State of Florida, do hereby certify that the foregoing is a true and correct statement of the information required by said sections, and I accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature of shareholder, officer, director, or registered agent

12. OFFICERS AND DIRECTORS

TITLE P
NAME CAVALIERE, THEODORE JR
STREET ADDRESS 2211 N. 38TH STREET
CITY-STATE-ZIP TAMPA FL 33605

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

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CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing was voluntarily furnished and was not required for the exemption stated in Section 119.07(3)(g), Florida Statutes. I further certify that I am an officer or director of the corporation, or the registered agent or trustee, or a person in possession of the power to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this filing.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3. Date Incorporated or Qualified

10/05/1992

3a. Date of Last Report

12/14/1995

4. FCI Number

59-3147164

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

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

13. I, the undersigned, being a shareholder or registered agent, or both, in the State of Florida, do hereby certify that the foregoing is a true and correct statement of the information required by said sections, and I accept the obligations of Section 607.0505, Florida Statutes.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

3-25-96

CR2E034 (12/95)