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

PROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

FILED Apr 24 1998 8:00am Secretary of State

L	1998	COUNT THE	DIVISION OF C	ORPORATI	ONS				
	II I I I I I I I I I I I I I I I I I I	505301 (SERVICE , INC	(2)						
Principal Plac	e of Business		Mailing Address				Babil Babil Andi		
18441 HARD ROCK RD P.O. BOX 10567 BROOKSVILLE FL 34801 US			18441 HARD ROCK RD P.O. BOX 10567 BROOKSVILLE FL 34601			DO NOT WRITE IN THIS	PDACE		
			US			3. Date Incorporated or Qualified			
						06/16/1976			
2. Principal P	lace of Business		2a. Mailing Address			4. FEI Number	Ar	oplied For	1
21		2	26			59-1674142		ot Applicable]
Sulte, Apt.	#. etc.	Į.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75		
City & State	<u> </u>		City & State			6 Flatin Council Financia		beriupe	-
23	•	 -	28			B. Election Campaign Financing Trust Fund Contribution	\$5.00 Added 1		[
Zip	Co	untry	Zip	Countr	у	8. This corporation owes or has paid the cur			1
24	25		29	30		Personal Property Tax due June 30.	Yes [] No	_
		dress of Current Re	gistered Agent			10. Name and Address of New Registered	Agent		4
	RTOR, J.R.	_		81	Name				
	010 CROOM ROA			82	Street A	ddress (P.O. Box Number is Not Acceptable)			1
DH	OOKSVILLE FL 34	ЮОТ		83					+
				_	<u></u>				4
				84	City	FL	85 Zip (Code	ł
11. Pursuant office or r	to the provisions of registered agent, or implementations of the registered agent, and	Sections 607.0502 an both, in the State of Faccept the obligation	d 607.1508, Florida Statute lorida. Such change was a s of, Section 607.0505, Flo	es, the abov authorized b orida Statute	re-named c y the corpo	corporation submits this statement for the purpose of oration's board of directors. I hereby accept the app	changing it ointment as	s registered registered	1
SIGNATURE		nanio of registered agent and				equired when re-instating) DATE			-
12.		OFFICERS AND DIE		13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	IS IN 12	8
TITLE	PD		DELETE	1.1 TITLE			Change	Addition	15
NAME	SARTOR, JOH			1.2 NAME					3
STREET ADDRESS	24010 CROOM BROOKSVILLE				1 ADDRESS				Ü
CITY-ST-ZIP TITLE	BROOKSVILLE	, TL 0000	DELETE	1.4 CITY-1 2.1 TITLE	S1 - ZIP		Change	Addition	16
NAME				2.2 NAME			onange		
STREET ADDRESS				1	I ADDRESS				
CITY-ST-ZIP				2. 4 CITY-	ST-ZIP				
TITLE			DELETE	3.1 TITLE			Change	☐ Addition]
NAME				3.2 NAME	-				-
STREET ADDRESS					T ADDRESS				1
CITY-ST-ZIP TITLE	 _		DELETÉ	3.4. CITY - 4.1 TITLE	ST-ZIP		Change	Addition	4
NAME				4.2 NAME			onango	Madikon	1
STREET ADDRESS				•	T ADDRESS				1
CITY-ST-ZIP				4.4 CiTY-					
TITLE			DELETE	5.1 TiTL€			Change	Addition	1
NAME	1			5.2 NAME	Į				
STREET ADDRESS					T ADDRESS				
CITY-ST-ZIP	<u> </u>		DELETE	5.4 CITY-1	ST-ZIP		Change	Addition	-
TITLE NAME			[] DECEIE	6.1 TITLE 6.2 NAME	}		— outlige	- ~001001	1
STREET ADDRESS					T ADDRESS				
CITY-ST-ZIP	•			6.4 CITY	ì				1
	certify that the inform	nation supplied with th	is filing does not qualify fo			in Section 119.07(3)(i), Florida Statutes. further ce	rtify that the	information	1

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 ar 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 on an attachment with an address.

Sound Saite Su

JOHN R. SARTOR 3/31/98 (352) 796-4540