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

PROFIT CORPORATION ANNUAL REPORT

1**9**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F55012

121

FILED Jun 04 1998 8:00am Secretary of State

1. Corporation MARKE	TMASTERS OF SOUTHE	` '				
Principal Place of Business Mailing Ad					I TOOKAD IND ALLON OLINE IDLAN ITOID INDI	it didir bibir bidir bibir didir iddi
1890 KINGSLEY AVE., SUITE 102 ORANGE PARK FL 32073		1890 KINGSLEY AVE., SUITE 102 ORANGE PARK FL 32073				
					DO NOT WRITE IN	THIS SPACE
					3. Date Incorporated or Qualified	
2 Oringinal Pi	ace of Business	2a. Mailing Address			11/24/1981 4. FEI Number	
21		26		59-2356229	Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required	
City & Stale		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28			Trust Fund Contribution	
Zip	Country	Zφ	Co	untry	8. This corporation owes or has paid the	ne current year Intangible
24	[25]	29	30	· r	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Cur	rent Registered Agent		 	10. Name and Address of New Regist	ered Agent
	NT LE Y, LOUIS L.			81 Name		
	4 KINGSLEY AVENUE			82 Street Add	fress (P.O. Box Number is Not Acceptable)	
OR	ANGE PARK FL 32073			83		
				03		
1				84 City		FL 85 Zip Code
11. Pursuant t office or re agent. Lar	o the provisions of Sections 607.0 egi ste red agent, or both, in the Sta in fam iliar with, and accept the ob	9502 and 607, 1508, Florida St ale of Honda-Such chango w ligations of, Section 607,0505	atutes, the a vas authorize i, I lorida Sta	bove-named cor ed by the corpora tutes.	poration submits this statement for the purp- tion's board of directors. I hereby accept th	ose of changing its registered e appointment as registered
SIGNATURE.						***
12.	Signature, typed or preted name of registered OLETOS RS. A	AND DIRECTORS	(NOTE Hegistero	d Agent signature requ	ADDITIONS/CHANGES TO OFFICERS	ATE S AND DIRECTORS IN 12
TITLE	PD	DELFTE		ile [ABBITION OF THE PROPERTY OF TH	Change Addition
NAME	ORREN, ROY H.	_	1,2 8			
STREET ADDRESS	1139 LAKE ASBURY DR		1.3 S	TREET ADDRESS		
CITY-ST-ZIF	GREEN COVE SPRINGS FL	32043		ITY - ST - ZIP		
TITLE	S TD	DELETE	217			Change Addition
NAME	HUNTLEY, LOUIS L.		2.2 N	AME		
STREET ADDRESS	104 MILWAUKEE AVENUE		2.3 \$	TREET ADDRESS		
	THATES TANK PL 32073		2.40	CITY-ST-ZIP		
THILE		DELETE	3.1 T	ITLE .		Change Addition
NAME			3.2 N	AME		
STREET ADDRESS			335	THEET ADDRESS		
CITY-ST-ZIP				OTY-ST-ZIP		
TITLE		☐ DELETE	417			Change Addition
NAME			4.21			
STREET ADDRESS			1	IREET ADDRESS		
CITY-ST-ZIP		Distre		TY-ST-ZIP		
TITLE		☐ DELETE	5.1 Ti	4		☐ Change ☐ Addition
NAME Proces apopus			5.2 N			
STREET ADDRESS			•	REFT ADDRESS		
CITY-\$T-ZIP TITLE	**************************************	DELETE		TY-ST-ZIP		Change 144200
NAME			611I			Change Addition
STREET ADDRESS			62 N			
				IREET ADDRESS		
CITY-SI-ZIP			6.4 C	1Y-S1-ZIP		

14. I 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 supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 changes in a true and accurate and that my name appears in the same legal effect as if made under eath; 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 changes in the same legal effect as if made under eath; the information 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certificate in Section 119.07(3)(iii), Florida Statutes. I further certificate in Section 119.07(3)(iii), Florida Statut