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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Jan 20 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

H43527

(1)

WOOD & SEITL, P.A.

Principal Place of Business Mailing Address									
240 NORTH WASHINGTON SUITE 500 SARASOTA FL 34236 US		240 NORTH WASHINGTO SUITE 500 SARASOTA FL 34236				DO NOT WRITE IN THIS S	PACE	=	
		US				3. Date Incorporated or Qualified			
						02/20/1985			
	Place of Business	2a. Mailing Address	h			4. FEI Number	ļ		plied For
Suite Apt # etc		[26]	_ 			59-2496135	Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	27			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State	h		6. Election Campaign Financing	\$!	5.00	Мау Ве	
23		[28]				Trust Fund Contribution	A	dded t	to Fees
Zip				Country		8. This corporation owes or has paid the curr	_ '	_	
24	25	25 29 30 9, Name and Address of Current Registered Agent			Personal Property Tax due June 30. Yes No 10, Name and Address of New Registered Agent				
		tett vedistelen Ydelit	8	17	Name	10, Halile and Address of Hew Registered A			
SEITL, WAYNE F., ESQ.			L	L	TVEITIC				
	O N WASHINGTON BLVD #46	0	8:	2	Street Ad	ddress (P.O. Box Number is Not Acceptable)			
	JITE 500		8:	1					
54	ARASOTA FL 34238		"	۱					
			84	4	City	FI	85	Zip (Code
41 Durawani	to the provinces of Sections 607.	0502 and 607 1509 Florida State	on the shor	Ť	named ac	progration submits this statement for the purpose of		ning it	o registered
office or agent. I	registered agent, or both, in the St am familiar with, and accept the ob	ate of Florida. Such change was a	authorized b	oy 1	the corpor	ration's board of directors. I hereby accept the appoint	inlme	int as	registered
SIGNATURE	Signature, typed or printed name of registered	Lagent and title it applicable (NOT	: Registered A	gent	nt signature rec	quired when reinstating) DATE			
12.	OFFICERS .	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRE	CTOR	S IN 12
TITLE	SD						☐ Ch	ange	☐ Addition
NAME									
STREET ADDRESS	240 NORTH WASHINGTON	i, suite 500	1.3 STREET ADDRESS		LODRESS				
CITY-ST-ZIP	SARASOTA FL			1.4 CITY-ST-ZIP					
TITLE	_			2.1 TITLE			Ch	ange	Addition
NAME				2.2 NAME					
STREET ADDRESS	240 NORTH WASHITNGON	I, SUITE 500	2.3 STREE	1 A	IDDRESS				
CITY-ST-ZIP	SARASOTA FL	Flotiere		2. 4 CITY-ST-ZIP 3.1 TITLE			<u> </u>		Large.
TITLE							∐ Ch	ange	
NAME				3 2 NAME					
STREET ADDRESS			3.3 STREET ADDRESS						
CITY-SI-ZIP	3.4 DELFTE 4.1				T- 7IP		Ch	2000	Addition
NAME	<u> </u>				1		011	ango	L Addition
	1		4. 2 NAMI		IODDECC.				
STREET ADDRESS	1		4.3 STREE		- 1				
CITY-ST-ZIP TITLE				4.4 CITY-ST-ZIP 5.1 TITLE			Ch	anoe	Addition
NAME			5.2 NAME					ungo	The months
STREET ADDRESS			5.3 STREE		IDDBEGG				
CITY-ST-ZIP			ł						
TiTLE				5.4 CITY-S1-ZIP 6.1 TITLE			Ch	ange	Addition
NAME			6.2 NAME		1		_		
STREET ADDRESS			63 STREE		ODBESS				
CITY-ST-ZIP			6.4 CITY-						
14. I hereby	certify that the information supplied	I with this filing does not qualify fo	r the exem	otic	on stated i	in Section 119.07(3)(i), Florida Statutes. I further cer	tify th	at the	information
officer or	fon this armual roport or suppleme director of the corporation or the r or Block 13 if changed, or on an a	eceiver or trustee empowered to e	urate and the execute this	nat s re	t my signat aport as re	ature shall have the same legal effect as if made und equired by Chapter 607, Florida Statutes; and that m	er oat y nam	ih; tha ne app	it I am an cears in