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

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1998

K41506

(2)

FILED May 06 1998 8:00am Secretary of State

Principal Place of Business WILLIAM A GOGEL 6080 GREENLAND RD. JACKSONVILLE FL 32258 Mailing Address WILLIAM A GOGEL 6080 GREENLAND RD. JACKSONVILLE FL 32258 2a. Mailing Address					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/25/1988 4. FEI Number Applied For			7
Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-2914870	Not Applicable \$8.75 Additional			
22		27		5. Certificate of Status Desired	Fee Required			
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip Country		Zip			This corporation owes or has paid the current year Intangible			1
24	25	29	30		Personal Properly Tax due June 30.	Yes No		
	9. Name and Address of Current	Registered Agent		nd to	10. Name and Address of New Registers	d Agent		1
608	GEL, WILLIAM A 10 GREEN LAND ROAD IXSONVILLE FL 32258		81 Name 82 Street Addr 83 City		ess (F.O. Box Number is Not Acceptable)	L 85 Z	ip Code	
agent. I an SiGNATURE	n familiar with, and accept the obliga Wellow A Samilian Ignature, typod or printed name of registored lighter	United the state of the state o	orida Statu L: Registered	by the corporations. Corporations. Agent signature redar		198]
12.	OFFICERS AND	DELETE	13.	f T	ADDITIONS/CHANGES TO OFFICERS A	Chan		5
NAME STREET ADDRESS CITY-ST-ZIP	GOGEL, WILLAIM 6080 GREENLAND RD. JACKSONVILLE FL	En Otterie	1.2 NAM 1.3 STR			Onani	je	DEMA /4
TITLE		DELETE	2.1 TITL			Chan	e Addition	15
NAME			2.2 NAN	AE				ĺ
STREET ADORESS			2.3 STR	EET ADDRESS				
CITY-ST-ZIP			2.4 CIT	Y-ST-ZIP				J
TITLE NAME		DELETE	3.1 TITL 3.2 NAM	1		Chang	e [] Addition	l
STREET ADDRESS				EFT ADDRESS				
CITY-ST-ZIP				Y-ST-ZIP				
TITLE		DELETE	4.1 TITL			Chang	e Addition	1
NAME			4. 2 NA	ME				1
STREET ADDRESS			4.3 STR	EET ADDRESS				
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·		Y-ST-ZIP]
TITLE		DELETE	5.1 TITU	E		Chang	ge Addition	
NAME			5.2 NAN					
STREET ADDRESS				EFT ADDRESS				1
TITLE		DEL e te		/-ST-ZIP		Chang	e	1
NAME		ריין טנינכונ	6.1 TITU 6.2 NAM			L vian	is [_] Muulioil	
STREET ADDRESS				EET ADDRESS				
CITY-ST-ZIP				r-St-Zip				1
	ortify that the information supplied wit	h this filing does not qualify fo			Section 119.07(3)(i), Florida Statutes. I further	certify that	the information	1

indicated on this annual report or supplied with this limit does not quality 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 oath; that I am an officer or director of the corporation or the roceiver or trustee ompowered 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.

SIGNATURE: 22/1... A Masch

8816 914 262-