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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L90

(1)

FILED Jan 21 1998 8:00am Secretary of State

l	ENDEAVOUR IN	ITERNATIONAL CO		(') ON						
Principal Place of Business Mailing Address								— I HEBUTANI BIR ADINI BODA BUBAN BING BINI BIRKI DIRKI BIRKI BUBAN BARKE BUBAN DABAN		
259 4TH AVENUE NORTH ST. PETERSBURG FL 33701 US 259 4TH AVENUE NORTH ST. PETERSBURG FL 33701 US US								DO NOT WRITE IN THIS SPACE		
								3. Date Incorporated or Qualified	7	
<u> </u>	, Principal Place of Business 2a. Mailing Address							07/11/1990	_	
21				2a. Mailing Address				4. FEI Number Applied For	\perp	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				59-3024837 Not Applicable	4	
22			27	27				5. Certificate of Status Desired Fee Required		
City & State			City	City & State				6. Election Campaign Financing \$5.00 May Be	1	
23			28					Trust Fund Contribution Added to Fees	_	
z	ip	Country	 1	Zip Cou				8. This corporation owes or has paid the current year Intangible		
24	o Name	25 and Address of Curren	29	30			Personal Property Tax due June 30. Yes No		4	
			r Mañistacan	Agent		B1 Na	ame	10. Name and Address of New Registered Agent	-	
	PECK, EDWII 259 4TH AVE									
,		BURG FL 33701				B2 St	reet Addr	t Address (P.O. Box Number is Not Acceptable)		
	OIL FEIENOL	ONG (6 33/0)			h	33			┪	
					-	14 0			╛	
						84 City		FL 85 Zip Code		
11.	Pursuant to the provis	sions of Sections 607.0502	2 and 607.150	08, Florida Statute	es, the ab	ove-na	med corp	poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered	1	
i	agent. I am lamiliar w	yith, and accept the obliga	ations of, Sect	ion 607.0505, Flo	rida Statu	by the les.	corporati	tion's board or directors. I hereby accept the appointment as registered		
SIGN	IATURE								1	
12.	Signature types	d or printed name of registered ager OFFICERS AND			Registered	Agent sig	nature require	ad when reinstating) DATE ADDITION OF TAXON TO CONTROL AND DIRECTORS IN 12	15	
TITLE	RS	OFFICEROARE	DINECTOR	DELETE	1.1 100	F	-	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	200	
NAME		ROBERT LEE VINCENT				P		obert Lee Vincent	7	
			2-61 g+	t ave. S. 1.3 STREET ADDRESS				287 61st Ave. So.	٤	
CITY-ST-ZIP			0100	OIBC UVC. D.			- 1	t. Petersburg, Fl. 33715	ž	
TITLE PS				DENETE DENETE			`	☐ Change ☐ Addition	72	
Robert L. Vincent					2.2 NAME					
		61st Ave. 8					ESS		ŀ	
CITY-S	St. P	etersburg, 1	F1. 33	715	_	Y-ST-ZIP	-		4	
NAME				□ occent	3.1 TITL 3.2 NAN			Change Addition		
	ADDRESS					-	tec			
CITY-ST-ZIP						3.3 STREET ADDRESS 3.4. CITY-ST-ZIP				
TITLE DELETE						4.1 TITLE		☐ Change ☐ Addition	+	
NAME					4 2 NAI					
STREET ADDRESS						4.3 STREET ADDRESS		·		
CITY-S	T-ZIP				4.4 C(T)	- ST - ZIP				
TITLE				☐ DELETE	5.1 TITL			☐ Change ☐ Addition	1	
NAME					5.2 NAM	E			Ī	
STREET	ADDRESS				5.3 STR	ET ADDR	ESS			
CITY-S	T-ZIP			D berese	_	- ST- ZIP			1	
TITLE				☐ DELETE	6.1 T(TL			L Change Addition		
NAME	4000500				6.2 NAM					
	ADDRESS					ET ADDA	ESS			
CITY-S		e information cumplied wit	h this filing d	age not qualify for		- SI - ZIP	totod in S	Species 110.07(3)(i) Florida Statutan I further partifuthal the information	4	

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 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; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

Robert Lee Vincent