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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P29180

(7)

AGENT INVESTORS HOLDING COMPANY

FILED Jan 26 1998 8:00am Secretary of State



Principal Place of Business Mailing Address												(1808 1868) 1881 	II BEII BIEII EICH	DIERR BIERR		IEII ISBI
201 ATP TOUR BLVD STE 150 PONTE VEDRA FL 32082				;	201 ATP TOUR BLVD STE 150 PONTE VEDRA FL 32082						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified					
US		١	US								ea			•		
2. Principal P	ace of Busin	nece		1 2-	Mailine	Address				<u> </u>	05/03/199 4. FEI Number	NO	 	- T-	Ann	lied For
2. 1 (110)par 1	ace or bosin	11033		26	. Tyleania iş	y Addition					1 "	000		-		Applicable
Suite, Apt. #, etc.					Suite, Apt. #, etc.						59-3010	380		\$8.7	4	ditional
22					27						5, Certificate of	Status Desired	<u>.</u>		Req	
City & State					City & State						6, Election Campaign Financing \$5.00 May Be					
23					Zip Country						Trust Fund Co		니		ed to	
Zip	Country							Junity			8. This corporati		· –		_	- 1
24	25 Name and Address of Current			29							Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent					
				r negi	BIGIOG A	gent .	81 Nam			me	10, Hambana A	duless of New	uefieraten s	Aguir		
	LICASTRO, I ATP TOU					82			ot Address (P.O. Box Number is Not Acceptable)							
STE 150																
PONTE VEDRA FL 32082								83								
								84	City	1			FL	85 Z	ip Co	ode
office or r	egistered ac	ent. or	Sections 607.050 both, in the State accept the obliga	of Flor	ida. Suci	n change was	ed by	the 4	ned corpo corporatio	oration submits this on's board of direct	statement for t ors. I hereby a	he purpose of ccept the appo	changin pintment	g its i as re	registered gistered	
SIGNATURE	Slopelure, brook	(or prioried	name of registered ago	ol and life	u d applicat	do (NO)	IF Register	ed Age	inl sign	ature regione	ed when reinstaling]		DATE			
12.	Signature, 191900		DIRECTORS 13				an argin	aid-a togs-at	ADDITIONS/CH	HANGES TO O		DIRECT	ORS	IN 12		
TITLE	8					DELETE	_	TITLE				<u> </u>		Chan		Addition
NAME	LEE, PE	TER					121	NAME								
STREET ADDRESS			BLVD, STE 15	0	1.3 S			1.3 STREET ADDRESS		ss						
CITY-ST-ZIP	PONTE						141	DITY - SI	T-ZIP							
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NAME		STRO.	GERALD				221	MAME								
STREET ADDRESS			BLVD, STE 15	0			235	STREET	ADDRE	SS						
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TITLE	VD					☐ DELET E	3.1 1							☐ Chan	ge	Addition
NAME	CRAFT.	JOHN					3.2 f	NAME								
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STREET ADDRESS							6.3 9	STREET.	ADDRE	ss						
CITY-ST-ZIP							6.4 (CITY-SI	T-ZIP							

I hereby certify that the informatio indicated on this annual report of officer or director of the conforation Block 12 or Block 13 if changed, or supplied with this "ing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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 or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

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