## 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 # P94000051823 (0)

THE 1508 CORPORATION

## **FILED** Apr 09 1998 8:00am Secretary of State

Principal Place of Business Mailing Address					- I TOOTHEAL LAW TOOM ONLY BOUND BOUND OF THE CONTROL	TI( <b>8) 1160) (8)19</b> 11	1086 NH 1081
1883 MOUND ST 1883 MOUND ST							
SARASOTA FL 34236 SARASOTA FL :					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					07/13/1994		
· ·		2a. Mailing Address	_		4. FEI Number	A	pplied For
Suite, Apt. #, etc.		26			65-0450854	<del></del>	lot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	27 Suite, Apt. #, etc.		5. Certificate of Status Desired	•	Additional Regulred
City & State		City & State	<u> </u>		6. Election Campaign Financing	<del></del>	May Be
23		28	28		Trust Fund Contribution		I to Fees
Zip	Country	Zφ	Country	y	8. This corporation owes or has paid the o	current year in	ntangible
24	25 29 30		30		Personal Property Tax due June 30.		□ No
p, Name and Address of Current Registered Agent  FIRMAN PORFOT 0 81 N					10. Name and Address of New Registered Agent		
FURMAN, ROBERT G							
1663 MOUND ST SARASOTA FL 34236			82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
97	WHOUTH FL 34230		83				
			-	011			
			84	City	F	L 85 Zip	Code
11. Pursuant	to the provisions of Sections 607.	.0502 and 607.1508, Florida Statute	es, the abov	e-named corp	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	of changing	its registered
agent. I a	am familiar with, and accept the of	bligations of, Section 607.0505, Flo	rida Statute	s.	tions board of directors, thereby accept the a	ppointment as	s registered
SIGNATURE			·				
12.	Signature, typed or printed name of registerer OFFICERS	d agent and title it applicable (NOTE AND DIRECTORS	Registered Ag	ent signature requir	red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A		RS IN 12
TITLE	PD	DELETE	1.1 TITLE		ADDITIONO/OFFAMES TO OFFICERS X	Change	Addition
NAME	FURMAN, ROBERT G		1.2 NAME				
STREET ADORESS	1663 MOUND STREET		1.3 STREE	T ADDRESS			
CATY-ST-ZNP	SARASOTA FL		1.4 DITY-	ST-ZIP			
TITLE	TS	☐ DELETE	2.1 TITLE			Change	☐ Addition
NAME OTROCT LEGISLA	CARLIN, MICHAEL G 1663 MOUND STREET		2.2 NAME	]			
STREET ADDRESS City-St-Zip	SARASOTA FL			T ADDRESS			
TITLE	ONINGUIN I'L	☐ DELETE	2.4 CITY - 3.1 TITLE	S1-ZP		Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET	T ADDRESS			
CITY-ST-ZIP			3.4. CITY-	ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP TITLE	<del>                                     </del>	DELETE	4.4 CITY-ST-ZIP			Change	Addition
NAME		La VIIII	5.1 TITLE 5.2 NAME			ட பாவழ்	
STREET ADDRESS			5.3 STREET	T ADDRESS			
CITY-ST-ZIP			5.4 CITY - 5	ı			
TITLE		☐ DELETE	6.1 TITLE			☐ Change	☐ Addition
NAME	. I		6.2 NAME				
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-ZIP			6.4 CITY - 5				
14. I hereby	certify that the information supplie	d with this fifing does not qualify fo	or the exemp	tion stated in	Section 119.07(3)(i), Florida Statutes. I further	certify that the	e information

Indicated on this annual report or supplied will his initial description 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 changing on an antaging meni with an address.

Michael G. Corlin