## 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 # P95000081448 (9)

incipal Place of Business	Malling Address
3613 MARCO DRIVE	3613 MARCO DRIVE
TAMPA FL 33614-2746	TAMPA FL 33614-2746

## FILED Mar 24 1998 8:00am Secretary of State

LDA RUSINESS SERVICES INC DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/23/1995 2. Principal Place of Business 2a. Mailing Address Applied For 21 59-3343299 Not Applicable 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5, Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zıp Country Country 8. This corporation owes or has paid the current year Intangible Yes □ No 24 25 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ANTON, LEONARD 3613 MARCO DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) TAMPA FL 33614 ~ ጌግ ዛ 6 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505. Florida Statutes. SIGNATURE Signature, typed or printed name of tegethered agent and title if applicable (NOTE: Registered Agent signature require nen reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE ☐ Change ☐ Addition ANTON, LEONARD NAME 1.2 NAME 3813 MARCO DRIVE STREET ADDRESS 1.3 STREET ADDRESS TAMPA FL 33614-2746 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition 217/16 TITLE ANTON, DIANA F. 2.2 NAME NAME 3613 Marco Drive 2.3 STREET ADDRESS STREET ADDRESS 746 Tampa, FL 2.4 City-St~ZiP CITY-ST-ZIP DELFTE 31 TITLE Change Addition TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP

14. Thereby 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 acqual report or supplied entitled 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 directly of the corporation of 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 the corporation of the receiver of trustee and that my name appears in Block 12 or the corporation of the receiver of the receiver of the corporation of the receiver of the r

SIGNATURE

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