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

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000091680 (4)

MARK	G. RODRIGUEZ, P.A.							
Principal Plac	e of Business	Mailing Address			<del>-</del>			
4055 CENTRA	AL AVE URG FL 33713	4055 CENTRAL AVE ST PETERSBURG FL 33713						
						DO NOT WRITE IN THIS SPA	CE.	
						3. Date Incorporated or Qualified		
e Dringian I	Place of Business	D. Barillan Balaina				11/05/1996	<del></del>	
<u> </u>	Tace of Business	2a, Mailing Address				4. FEI Number	·	olied For
Suite, Apt.	# ata	26 Culta Ant # ata				59-3413583	<del>,_</del>	Applicable
22		Suite, Apt. #, etc. 27				5. Certificate of Status Desired	<b>8.75</b> A Fee Red	
City & Stai	θ	City & State					\$5.00	
Zip	Country	Zip	Countr				Added to	
24	25	29	30	nı y		8. This corporation owes or has paid the current Personal Property Tax due June 30.		ingible LNo
	g. Name and Address of Curre		1301	•	· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Registered Age		, NO
RODRIGUEZ, MARK G				91	Name			
4055 CENTRAL AVE								
ST PETERSBURG FL 33713				82	Street A	ddress (P.O. Box Number is Not Acceptable)		
"	TEIENODONG TE 001 10		1	B3				
				84	City	la la	5 Zip C	odo.
,						FLI	`\ '	
11, Pursuant office or agent 1 a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the oblig	02 and 607.1508, Florida Statut e of Florida. Such change was a pations of, Section 607.0505, Flo	es, the abo authorized orida Statu	ove by les	-named c the corpo	orporation submits this statement for the purpose of charation's board of directors. I hereby accept the appoint	anging its ment as r	registered egistered
SIGNATURE					<del> </del>			
Signature, typed or printed name of registered agont and title if applicable. (NOTE:  12. OFFICERS AND DIRECTORS			13.	Ager	nt signature re	equired when reinstating) DATE		
TITLE			1.1 10L	ŗ.	Т	ADDITIONS/CHANGES TO OFFICERS AND DI	Change	Addition
NAME	SARNAUSE LUBY A		1.2 NAW				onango	L Addition
STREET ADDRESS	4444 6444				YDDDCCC			
CITY-ST-ZIP	ST PETERSBURG FL 33713			1.3 STREET ADDRESS				
TITLE	DELETE			1.4 C(TY - ST - Z(P) 2.1 T(TLE			Change	Addition
NAME			1	2.2 NAME			Change	Reconstant
STREET ADDRESS				2.3 STREET ADDRESS				
CITY-ST-ZIP	·			2.4 CITY-ST-ZIP				
TITLE		☐ DELETÉ	3.1 T(TL)		1-ZIP		Change	Addition
NAME			3.2 NAM				onarige	nuomoni
STREET ADDRESS				-	ADDRESS			
CITY-ST-ZIP					1			*
TITLE		DELETE	3.4. C(T) 4.1 T(T)		1 · 21P	П	Change	Addition
				-				

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

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST- 2IP

4.4 CITY - ST - ZIP

MONATURE MALL MARKET

125-198/1012/2220146

Change

Change

Addition

Addition

**FILED** 

Apr 06 1998 8:00am

Secretary of State