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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary state ₹

FILED

May 20 1998 8:00am

Secretary of State

DOCUMENT # P97000013120 (5)

Block 12 or Block 13 if changed, or on an attachment with an address.

CYBERBAN REAL ESTATE SERVICES, INC.

708 S. CHURCH STREET 708 S. CHURCH STREET TAMPA FL 33609 TAMPA FL 33609 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/10/1997 2a. Mailing Address 2. Principal Place of Business Applied For Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional П Fee Regulred 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes 24 30 Personal Property Tax due June 30. 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name MCNAMARA, THOMAS P 2909 BAY TO BAY BLVD **B2** Street Address (P.O. Box Number is Not Acceptable) SUITE 309 вз **TAMPA FL 33629 B4** 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 registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. **DELETE** Change Addition THILE 11 THLE NAME HUNT, WILLIAM R 1.2 NAME 2017 BRANCH TREE LANE 1.3 STREET ADDRESS STREET ADDRESS **BRANDON FL 33511** 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE AVILES, JOHN M NAME 2.2 NAME STREET ADDRESS 708 S CHURCH ST 2.3 STREET ADDRESS **TAMPA FL 33609** CITY-ST-ZIP 2 4 CITY-ST-ZIP Addition DELETE ☐ Change 31 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET 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 4 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE 52 NAME NAME 53 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

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