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

P97000041180 (5)

FILED Apr 14 1998 8:00am Secretary of State

I PARAMETER OF THE PROPERTY OF		
incipal Place of Business Mailing Address (10010011 10		
165-00-612 P.O. BOX 78021		
SEBASTINA FL 32958 SEBASTIAN FL 32978		
DO NOT WRITE IN THIS SPACE		
3. Date Incorporated or Qualified		
05/05/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Appl	ad Fac	
	ied For Applicable	
I Outs And All of the Control of th		
Suite, Apr. #, etc. 5. Certificate of Status Desired Fee Requestion Fee Requestion (Control of Status Desired Fee Requestion		
City & State Gilly & State Gil	av Re	
23 SEDASTIAN, FL 28 SEDASTIAN FL Trust Fund Contribution Added to		
Zip Country 7ip Country 8 This corporation owes or has paid the current year Intan	gible	
24 32958 25 USA 29 33978 30 USA Personal Property Tax due June 30. 12 Yes 1	No	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent		
CATALANO, ORLANDO		
711 SILVERTHORN CT. 82 Street, Address (P.Q. Box Number is Not Acceptable)		
BAREFOOT BAY FL 32958		
83		
84 City Q C \ D	de_	
BAretoot Bay FL 330	76	
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 r 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 re	egisterea gistered	
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.		
SIGNATURE Signature typed or printed hence of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE		
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	IN 12	
	Addition	
NAME ON LANDO CATALANO 12 NAME		
STREET ADDRESS THE SIZE THORN CA. 1.3 STREET ADDRESS		
CITY-ST-ZIP BACE TWO BAU FL 329716 14CITY-ST-ZIP		
	Addition	
NAME CATOLONO 22 NAME		
STREET ADDRESS 11 SI WEATHOUD CA. 2.3 STREET ADDRESS		
CITY-SI-ZIP BACEBOY BAY FY 32X176 24CITY-SI-ZIP		
TITLE TREASURER LIDELETE STATILE	Addition	
NAME SNAWN CATALAND 32 NAME	İ	
STREET ADDRESS 901 Nu CAShew CAT 33 STREET ADDRESS		
CITY-ST-ZIP Baretiet Day C-L 33976 34.CITY-ST-ZIP		
TITLE SECRETARY DELETE ATTILE	Addition	
NAME Kim CATALANO		
STREET ADDRESS 901 NW CASPEN CIT. 4.3 STREET ADDRESS		
CITY-ST-ZIP BARE FOUL BAY FL 32476 44CITY-ST-ZIP	4 4 491	
THE STATE STATE	Addition	
NAME 5.2 NAME		
STREET ADDRESS 5.3 STREET ADDRESS		
CTTY-ST-ZIP	Addition	
	Audilionii	
NAME 62 NAME		
STREET ADDRESS 63 STREET ADDRESS		
CITY-S1-ZIP 64 CITY-S1-ZIP 64 CITY-S1-ZIP 64 CITY-S1-ZIP 74. 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 in	formation	

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 any other productions with \$10 and others.