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 # 1. Corporation Name P97000086425 (0)

FILED Feb 03 1998 8:00am Secretary of State

	ce of Business	Mailing Address				
2929 DEER RUN SOUTH 2929 DEER RUN SOUTH			·u			
CLEARWATER FL 34621 CLEARWATER FL 34621						
1-2					DO NOT WRITE IN THIS	SPACE
					3. Date Incorporated or Qualified	
a Delacional	Diagram of Discharge				10/05/1997	
2. Principal Place of Business 2a. Mailing Address 21 21979 U.S. 19 JJ. 26					4, FEI Number	Applied For
21 O(17 17 U.S., M . 26					59-3475473	Not Applicable
22 27					5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State City & State					a Flantina Communica Filancia	
23 CLEARWATER FL 28					6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country Zip			Countr	у	8. This corporation owes or has paid the co	
24 3376	65 25 MINELLAS	29	30		Personal Property Tax due June 30.	Yes No
	g, Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registered	
MCAROLE, BERNARD P III				Name		
2929 DEER RUN SOUTH				Street Add	dress (P.O. Box Number is Not Acceptable)	
CLEARWATER FL 34621						
			83			
			84	City		85 Zip Code
			-		FI	_ '
11, Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above- office or registered agent, or both, in the State of Florida, Such change was authorized by					poration submits this statement for the purpose	of changing its registered
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						
12.	Signature, typed or printed name of registered ag	rent and title if applicable (NO ND DIRECTORS		ent signature requ	ired when reinstating) DATE	
TITLE	PD	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
NAME	MCARDLE, BERNARD P III		1.2 NAME	1		C Change C Adorton
STREET ADDRESS	2929 DEER RUN SOUTH			F ADDRESS		S
CITY-ST-ZIP	CLEARWATER FL 34621		1.4 City-1			Į.
TITLE		DELETE	2.1 TITLE	,,		Change Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREE	ADDRESS		
CITY-ST-ZIP	ne		2. 4 CITY-	ST-ZIP		
TITLE		DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3 3 STREET	ADDRESS		
CITY-ST-ZIP			3 4. CITY -	S1 - ZIP		
TITLE		☐ DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME			4. 2 NAME			
STREET ADDRESS	,		4.3 STREET	ADDRESS		ľ
CITY-ST-ZIP			4.4 CITY- 9	T-ZIP		
TITLE			5.1 TITLE	ļ		☐ Change ☐ Addition
NAME			5.2 NAME	}		
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY - S	T-ZIP		I
TITLE		T beinge				
		DELETE	6.1 TITLE			Change Addition
NAME OTREET ADDRESS		DELETE	6.2 NAME	ļ	441	Change Addition
STREET ADORESS CITY-ST-ZIP		☐ DELETE				Change Addition

ies not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in indicated on this annual rep officer or director of the cor Block 12 or Block 13 if char