DOCUMENT # p96000066305 (9)  1. Corparea Name  221F, INC.  2831 Ringling Boulevard  30 Date Incorporate or Dunded  08/08/1996  2 Protoppi Place of Business  2 A. Making Address  2 A. Protoppi Place of Business  2 A. Protoppi Place of Business  2 A. Protoppi Place of Business  2 B. Making Address  2 Do Not Writte In This SPACE  0 B. Obet Incorporation Counted  0 B./08/1996  3 Deletion Countered  5 Do Not Writte In This SPACE  0 B. Obet Incorporation Countered  0 B./08/1996  5 Do Dod Dunded  0 B./08/1996  5 Dod Business  2 Do Country  2 Do Country  2 Do Country  2 Do Country  3 Dod Country  3 Dod Country  4 Do Not Writte In This SPACE  5 Do Rectance of Status Desired  5 Do Country  6 Do Rectance of Status Desired Agent  7 Do Not Writte In This SPACE  7 Do Not Acceptable  7 Do Not A	State	FILED or 29, 1999 Secretary of 04-29-1999 90206 038	Se	ARTMENT OF STATE Prine Harris . tary of State F CORPORATIONS	FLORIDA DEPA Kather	NG FEE AFT	PROFIT CORPORATION ANNUAL REPORT 1999	CO
Maining Address  28 31 Ringling Boulevard  28 31 Ringling Boulevard  Suite 219F  Sarasota, FL  34236  2. Principal Place of Business  2. Maining Address  2. Sarasota, FL  34236  3. Date incorporated or Ovalided  08/08/1996  4. FEL Number  Appl  3. Date incorporated or Ovalided  08/08/1996  4. FEL Number  Appl  4. FEL Number  Appl  5. Oct Not Writte in This SPACE  3. Date incorporated or Ovalided  08/08/1996  4. FEL Number  Appl  5. Oct Not Writte in This SPACE  3. Date incorporated or Ovalided  08/08/1996  4. FEL Number  Appl  5. Oct Not Writte in This SPACE  3. Date incorporated or Ovalided  08/08/1996  4. FEL Number  Appl  5. Oct Not Writte in This SPACE  5. Oct Not Not Writte in This SPACE  5. Oct Not Writte in Th	130.00	04-29-1999 90200 036	-   . 	ę	(9)	9600006630	OCUMENT # P	DOCU
2831 Ringling Boulevard 2831 Ringling Boulevard Suite 219F Suite 2		4 449578 0006 79 5					221F, INC.	221F
2. Principal Place of Business   2. Mailing Address   2. Mailing Address   4. FEI Number   Appl   Appl   22   22   27   5. Centificate of Status Desired   \$3.75 Ao   5.00 M   5.00 M		DO NOT WRITE IN THIS SP	DC	F	2831 Ringl Suite 2191		2831 Ringling Suite 219F	2831 Suit
Suite. Apt. g. etc. 28 Suite. Apt. g. etc. 27 Suite. 28 Suite. Apt. g. etc. 28 Suite. Apt. g. etc. 28 Suite. Apt. g. etc. 28 Suite. 29			1 .					
Sute. Apit. F. etc.    Sute. Apit. F. etc.	Applied For Not Applicable	1659	1		. Mailing Address		Principal Place of Business	· ·
City & State    City & State   City   Country   Zip   Zis   Zis	7.5 Additional ee Required		1	The same of the sa	Suite, Apt. #,.etc		Suite, Apt. #, etc.	Suite, Apt
Zip   Country   Zip   Country   Zip   Country   S. This corporation owes the current year intangible   Personal Property Tax.   Yes   Yes   S. Name and Address of Current Registered Agent   S. Name and Address of New Registered Agent   S. Name and Address of New Registered Agent   S. Name and Address of New Registered Agent   S. Name   Name and Address of New Registered Agent   S. Name   Name and Address of New Registered Agent   S. Name   S. Street Address (P.O. Box Number is Not Acceptable)   S. Street Address (P.O. Box Numb	.00 May Be	1 1	1	_	City & State		City & State	City & Sta
SCHIMMEL, JOSEPH B. 9400 S. Dadeland Boulevard - Suite 600 82 Street Address (P.O. Box Number is Not Acceptable)  Miami, FL 33156  84 City FL 85 Zip Co  11. Pursuant to the provisions of Sections 607.6502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing is re reflected agent or south the Stote of Florida. Such change the above-named corporation submits this statement for the purpose of changing is re reflected agent or south the Stote of Florida. Such change with a composition of directors. Thereby accept the applications of Section 807.0502 and 607.1508. Florida Statutes.  SIGNATURE  12. MOFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. TITLE  15. T		n owes the current year Intang	8. This corporation ov	· · · · · · ·	Zip	untry	. —	Zip
SCHIMMEL, JOSEPH B. 9400 S. Dadèland Boulevard - Suite 600 82 Street Address (P.O. Box Number is Not Acceptable)  Miami, FL 33156  84 City FL 85 Zip Co  11. Pursuant to the provisions of Sections 607.9502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its re office or registered agent, or both, in the State of Florida, Such change was automoted by the corporation's board of directors. I hereby accept the appointment as regis agent, and machine with and accept the obligations of, Section 607.0502, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its re office or registered agent, or both, in the State of Florida, Such change was automoted by the corporation's board of directors. I hereby accept the appointment as regis agent, and machine with an advanced submits this statement for the purpose of changing its re office or registered agent and title I applicable (Interest Statutes). The purpose of pretited name of inquitered agent and title I applicable (Interest Statutes). The purpose of pretited name of inquitered agent and title I applicable (Interest Statutes). The purpose of changing its re office or registered agent, or both in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its re office or registered agent. The purpose of changing its re office or registered agent.  SIGNATURE  DELETE 1.1 TITLE	i ∐No	<del></del>	· · · · · · · · · · · · · · · · · · ·	30	Acres d Agrant			24
Signature, typed or pretted agent and title if applicable   (NOTE: Registered Agent and remained in Partie   DATE	ig its registered			84 City				
12. OFFICERS AND DIRECTORS  INLE PD	as registered	atement for the purpose of cha	ration submits this statem	utes, the above-named corporation	da. Such change was a	both, in the State of FI	office or registered agent, or	office or
NAME	as registered	atement for the purpose of cha I hereby accept the appointment	n's board of directors. I he	utes, the above-named corpt authorized by the corporatio lorida Statutes.	da. Such change was a f, Section 607.0505, Flo	both, in the State of FI accept the obligations	office or registered agent, or agent. I am familiar with, and NATURE	office or agent. I a
Schimmel, Brenda H.  2831 Ringling Boulevard Sarasota, FL 34238  Iduary Street Address	as registered	atement for the purpose of cha I hereby accept the appointment	n's board of directors. I he	utes, the above-named corporation authorized by the corporation lorida Statutes.  TE: Registered Agent signature required.	da. Such change was a f. Section 607.0505, Flo	both, in the State of FI accept the obligations name of registered agent and	office or registered agent, or agent. I am familiar with, and NATURE	office or agent. I a
STREET ADDRESS CITY-ST-ZIP TITLE STD SCHIMMEN, Herbert G. 21 STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE OBLETE STRING STREET ADDRESS CITY-ST-ZIP TITLE OBLETE STRING STREET ADDRESS CITY-ST-ZIP TITLE OBLETE OBLETE STRING Change Change Change Change Change Change Change	es registered	atement for the purpose of cha I hereby accept the appointment	n's board of directors. I he	utes, the above-named corporation authorized by the corporation authorized Statutes.  TE: Registered Agent signature required.	da. Such change was a f. Section 607.0505, Flo  f applicable (NOTE	both, in the State of FI accept the obligations name of registered agent and	office or registered agent, or agent. I am familiar with, and NATURE  Signature, typed or printed	office or agent. I a SIGNATURE
Sarasota, FL 34238	es registered	atement for the purpose of cha I hereby accept the appointment	n's board of directors. I he	utes, the above-named corporation authorized by the corporation authorized by the corporation at the corpora	da. Such change was a f, Section 607.0505, Flo if applicable (NOTE ECTORS	both, in the State of FI accept the obligations name of registered agent and OFFICERS AND D	office or registered agent, or agent. I am familiar with, and NATURE  Signature, typed or printed	office or agent. I a SIGNATURE  12.
TITLE STD DELETE 21 TITLE Change  NAME SChimmel, Herbert G. 22 NAME  STREET ADDRESS 2831 Ringling Boulevard 23 STREET ADDRESS  CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZP TITLE DELETE STREET ADDRESS CITY-ST-ZP TITLE DELETE OBELETE STREET ADDRESS CITY-ST-ZP TITLE DELETE OBELETE OBEL	es registered	atement for the purpose of cha I hereby accept the appointment	n's board of directors. I he	utes, the above-named corporation authorized by the corporation authorized by the corporation at the corpora	da. Such change was a f. Section 607.0505, Flo if applicable (NOTE ECTORS	both, in the State of Fl accept the obligations name of registered agent and OFFICERS AND D	office or registered agent, or agent. I am familiar with, and NATURE  Stgmature, typed or printed  PD  Schimmel	office or agent. I a SIGNATURE  12. TITLE NAME
SCHIMMEL, Herbert G.  STREET ADDRESS  CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE  DELETE DELETE Change Change Change Change Change	es registered	atement for the purpose of cha I hereby accept the appointment	n's board of directors. I he	utes, the above-named corporation authorized by the corporation authorized by the corporation at the corpora	da. Such change was a f. Section 607.0505, Flo if applicable (NOTE CTORS DELETE	name of registered agent and OFFICERS AND D  Brenda F gling Boul	office or registered agent, or agent. I am familiar with, and NATURE  Signature, typed or printed  PD  Schimmel  2831 Rin	office or agent I a SIGNATURE  12. TITLE NAME STREET ADDRESS
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE STREET ADDRESS CITY-ST-ZIP TITLE DELETE Change Change Change	as registered  CTORS IN 12  ange Addition	atement for the purpose of cha I hereby accept the appointment	n's board of directors. I he	utes, the above-named corporation authorized by the corporation au	da. Such change was a f. Section 607.0505, Flo if applicable (NOTE CTORS DELETE	name of registered agent and OFFICERS AND D  Brenda F gling Boul	office or registered agent, or agent. I am familiar with, and NATURE    Signature, typed or printed   PD   Schimmel   2831 Rin   Sarasota	office or agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP
DELETE   DELETE   3.1 TITLE   3.2 NAME   3.2 NAME   3.2 NAME   3.3 STREET ADDRESS   3.3 STREET ADDRESS   3.4 CITY-ST-ZIP   TITLE   DELETE   4.1 TITLE   Change   Ch	as registered  CTORS IN 12 ange Addition	atement for the purpose of cha I hereby accept the appointment	n's board of directors. I he	utes, the above-named corporational statutes.  TE: Registered Agent signature required  13.  1.1 TITLE  12 NAME  13 STREET ADDRESS  14 CITY- ST- ZIP  2.1 TITLE	da. Such change was a f. Section 607.0505, Flo if applicable (NOTE ECTORS DELETE EVAR DELETE	name of registered agent and OFFICERS AND D  Brenda F gling Boul , FL 3423	office or registered agent, or agent. I am familiar with, and NATURE    Signature, typed or printed	office or agent 12 SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE
DELETE   DELETE   3.1 TITLE   3.2 NAME   3.2 NAME   3.2 NAME   3.3 STREET ADDRESS   3.3 STREET ADDRESS   3.4 CITY-ST-ZIP   TITLE   DELETE   4.1 TITLE   Change   Ch	as registered  CTORS IN 12 ange Addition	atement for the purpose of cha I hereby accept the appointment	n's board of directors. I he	utes, the above-named corporational statutes.  TE: Registered Agent signature required  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME	da. Such change was a f. Section 607.0505, Flo  If applicable (NOTE  ECTORS  DELETE  DELETE	name of registered agent and OFFICERS AND D  Brenda F gling Boul , FL 3423 , Herbert	office or registered agent, or agent. I am familiar with, and NATURE  PD Schimmel 2831 Rin Sarasota STD Schimmel	office or agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME
STREET ADDRESS   33 STREET ADDRESS   34 CITY-ST-ZIP   TITLE   DELETE   41 TITLE   Change	as registered  CTORS IN 12 ange Addition	atement for the purpose of cha I hereby accept the appointment	n's board of directors. I he	utes, the above-named corporational corporational statutes.  TE: Registered Agent signature required  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS	da. Such change was a f. Section 607.0505, Flo  If applicable (NOTE  ECTORS  DELETE  DELETE	name of registered agent and OFFICERS AND D  Brenda F gling Boul , FL 3423 , Herbert	office or registered agent, or agent. I am familiar with, and NATURE  PD Schimmel 2831 Rin Sarasota STD Schimmel	office or agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME
CITY-ST-ZIP	eCTORS IN 12 ange Addition	atement for the purpose of cha I hereby accept the appointment	n's board of directors. I he	utes, the above-named corporational corporational statutes.  TE: Registered Agent signature required  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP	da. Such change was a f. Section 607.0505, Flo  If applicable (NOTE  ECTORS  DELETE  Vard  DELETE	name of registered agent and OFFICERS AND D  Brenda F gling Boul , FL 3423 , Herbert	office or registered agent, or agent. I am familiar with, and NATURE  PD Schimmel 2831 Rin ST-ZIP Schimmel STD Schimmel 2831 Rin Sarasota STD Schimmel 3831 Rin Schimmel Schimmel Schimmel Schimmel Schimmel Schimmel	office or agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP
DELETE	eCTORS IN 12 ange Addition	atement for the purpose of cha I hereby accept the appointment	n's board of directors. I he	utes, the above-named corporational statutes.  TE: Registered Agent signature required  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE	da. Such change was a f. Section 607.0505, Flo  If applicable (NOTE  ECTORS  DELETE  Vard  DELETE	name of registered agent and OFFICERS AND D  Brenda F gling Boul , FL 3423 , Herbert	office or registered agent, or agent. I am familiar with, and NATURE  PD Schimmel 2831 Rin Sarasota STD Schimmel 2831 Rin Sarasota STD Schimmel Schimmel Schimmel Schimmel	office or agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE
NAME	eCTORS IN 12 ange Addition	atement for the purpose of cha I hereby accept the appointment	n's board of directors. I he	utes, the above-named corporational statutes.  TE: Registered Agent signature required  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME	da. Such change was a f. Section 607.0505, Flo  If applicable (NOTE  ECTORS  DELETE  Vard  DELETE	name of registered agent and OFFICERS AND D  Brenda F gling Boul , FL 3423 , Herbert	office or registered agent, or agent. I am familiar with, and NATURE  PD Schimmel 2831 Rin Sarasota STD Schimmel 2831 Rin Schimmel Schimmel Schimmel Schimmel Schimmel	office or agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME
STREET ADDRESS   4.3 STREET ADDRESS   4.4 CITY-ST-ZIP	eCTORS IN 12 ange Addition	atement for the purpose of cha I hereby accept the appointment	n's board of directors. I he	utes, the above-named corporation authorized by the corporation corporation and the corporation attention and the corporation	da. Such change was a f. Section 607.0505, Flo  If applicable (NOTE  ECTORS  DELETE  PORTOR  DELETE  OF DELETE  OF DELETE  OF DELETE  OF DELETE	name of registered agent and OFFICERS AND D  Brenda F gling Boul , FL 3423 , Herbert	office or registered agent, or agent. I am familiar with, and NATURE    PD   Schimmel   2831 Rin   Sarasota   STD   Schimmel   Schimmel   Schimmel   Sarasota   STD   Schimmel   Sarasota   STD   Schimmel   Sarasota   STD   Schimmel   Sarasota   STO   Schimmel   Sarasota   STO   Schimmel   Sarasota   STO   Sarasota   Sa	office or agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS
CITY-ST-ZP	eCTORS IN 12 ange Addition	atement for the purpose of cha I hereby accept the appointment	n's board of directors. I he	utes, the above-named corporation authorized by the corporation lorida Statutes.  TE: Registered Agent signature required  13.  1.1 TITLE  12 NAME  13 STREET ADDRESS  14 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE	da. Such change was a f. Section 607.0505, Flo  If applicable (NOTE  ECTORS  DELETE  PORTOR  DELETE  OF DELETE  OF DELETE  OF DELETE  OF DELETE	name of registered agent and OFFICERS AND D  Brenda F gling Boul , FL 3423 , Herbert	office or registered agent, or agent. I am familiar with, and NATURE  PD Schimmel 2831 Rin Sarasota STD Schimmel 2831 Rin Sarasota STD Schimmel 2831 Rin Schimmel	office or agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP
TITLE	eCTORS IN 12 ange Addition	atement for the purpose of cha I hereby accept the appointment	n's board of directors. I he	utes, the above-named corporation authorized by the corporation lorida Statutes.  TE: Registered Agent signature required  13.  1.1 TITLE  12 NAME  13 STREET ADDRESS  14 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME	da. Such change was a f. Section 607.0505, Flo  If applicable (NOTE  ECTORS  DELETE  PORTOR  DELETE  OF DELETE  OF DELETE  OF DELETE  OF DELETE	name of registered agent and OFFICERS AND D  Brenda F gling Boul , FL 3423 , Herbert	office or registered agent, or agent. I am familiar with, and NATURE  PD Schimmel 2831 Rin Sarasota STD Schimmel 2831 Rin Sarasota STD Schimmel Schimmel Schimmel ET ADDRESS 2831 Rin Sit ZP Schimmel	office or agent 1 a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE
NAME	eCTORS IN 12 ange Addition	atement for the purpose of cha I hereby accept the appointment	n's board of directors. I he	utes, the above-named corporation authorized by the corporation lorida Statutes.  TE: Registered Agent signature required  13.  1.1 TITLE  12 NAME  13 STREET ADDRESS  14 CITY-ST-ZIP  2.1 TITLE  22 NAME  23 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  32 NAME  33 STREET ADDRESS  34 CITY-ST-ZIP  41 TITLE  4 2 NAME  4.3 STREET ADDRESS	da. Such change was a f. Section 607.0505, Flo  If applicable (NOTE  ECTORS  DELETE  PORTOR  DELETE  OF DELETE  OF DELETE  OF DELETE  OF DELETE	name of registered agent and OFFICERS AND D  Brenda F gling Boul , FL 3423 , Herbert	office or registered agent, or agent. I am familiar with, and NATURE    PD   Schimmel   2831 Rin   Sarasota   STD   Schimmel   Schim	office or agent 1 a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME
	as registered  CTORS IN 12  ange Addition  Addition  ange Addition  Addition	atement for the purpose of cha I hereby accept the appointment DATE ANGES TO OFFICERS AND C	n's board of directors. I he	utes, the above-named corporation authorized by the corporation lorida Statutes.  TE: Registered Agent signature required  13.  1.1 TITLE  12 NAME  13 STREET ADDRESS  14 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP	da. Such change was a f. Section 607.0505, Floring Control (NOTE ECTORS DELETE CONTROL (NOTE ECTORS)  DELETE  DELETE  DELETE  DELETE  DELETE	name of registered agent and OFFICERS AND D  Brenda F gling Boul , FL 3423 , Herbert	office or registered agent, or agent. I am familiar with, and NATURE    PD   Schimmel   2831 Rin   Sarasota   STD   Schimmel   2831 Rin   Sarasota   STD   Schimmel   Schimmel   2831 Rin   Sarasota   STD   Schimmel   Sarasota   STD   S	office or agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP
	as registered  CTORS IN 12  ange Addition  Addition  ange Addition  Addition	atement for the purpose of cha I hereby accept the appointment DATE ANGES TO OFFICERS AND C	n's board of directors. I he	utes, the above-named corporation authorized by the corporation lorida Statutes.  TE: Registered Agent signature required  13.  1.1 TITLE  12 NAME  13 STREET ADDRESS  14 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE	da. Such change was a f. Section 607.0505, Floring Control (NOTE ECTORS DELETE CONTROL (NOTE ECTORS)  DELETE  DELETE  DELETE  DELETE  DELETE	name of registered agent and OFFICERS AND D  Brenda F gling Boul , FL 3423 , Herbert	office or registered agent, or agent. I am familiar with, and NATURE    PD   Schimmel 2831 Rin Sarasota	office or agent. I a SIGNATURE  12.  111-E  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME
TITLE DELETE 6.1 TITLE Change	as registered  CTORS IN 12  ange Addition  Addition  ange Addition  Addition	atement for the purpose of cha I hereby accept the appointment DATE ANGES TO OFFICERS AND C	n's board of directors. I he	utes, the above-named corporation authorized by the corporation lorida Statutes.  TE: Registered Agent signature required  13.  1.1 TITLE  12 NAME  13 STREET ADDRESS  14 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  5.1 TITLE  5.2 NAME	da. Such change was a f. Section 607.0505, Floring Control (NOTE ECTORS DELETE CONTROL (NOTE ECTORS)  DELETE  DELETE  DELETE  DELETE  DELETE	name of registered agent and OFFICERS AND D  Brenda F gling Boul , FL 3423 , Herbert	office or registered agent, or agent. I am familiar with, and NATURE  PD Schimmel 2831 Rin Sarasota STD Schimmel 2831 Rin Sarasota STD Schimmel 37.2P Schimmel 57.2P Schimmel 58.31 Rin Sarasota STD Schimmel 58.31 Rin Sarasota STD Schimmel 58.31 Rin 58.32P	office or agent 1 a gent 1 a g
COUNT	as registered  CTORS IN 12  ange Addition  Addition  ange Addition  Addition	atement for the purpose of cha I hereby accept the appointment DATE ANGES TO OFFICERS AND C	n's board of directors. I he	utes, the above-named corporation authorized by the corporation lorida Statutes.  TE: Registered Agent signature required  13.  1.1 TITLE  12 NAME  13 STREET ADDRESS  14 CITY-ST-ZIP  2.1 TITLE  22 NAME  23 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  32 NAME  33 STREET ADDRESS  34 CITY-ST-ZIP  41 TITLE  4 2 NAME  4.3 STREET ADDRESS  - 44 CITY-ST-ZIP  5.1 TITLE  5 2 NAME  5 3 STREET ADDRESS	da. Such change was a f. Section 607.0505, Floring Control (NOTE ECTORS DELETE CONTROL (NOTE ECTORS)  DELETE  DELETE  DELETE  DELETE  DELETE	name of registered agent and OFFICERS AND D  Brenda F gling Boul , FL 3423 , Herbert	office or registered agent, or agent. I am familiar with, and NATURE  PD Schimmel 2831 Rin Sarasota STD Schimmel 2831 Rin Sarasota STD Schimmel 37-ZIP Schimmel 57-ZIP Schimmel 58-ZIP SCHIMEL 58-ZIP SCHIMMEL 58-ZIP SCHIMMEL SCHIMEL 58-ZIP SCHIMEL 58-ZIP SCHIMEL 58-ZIP SCHIMEL 58-ZIP SCH	office or agent. I a signature  12. SIGNATURE  12. TITLE  NAME STREET ADDRESS CITY-ST-ZIP TITLE  NAME STREET ADDRESS
IVAN'E I	as registered  COTORS IN 12  Inge Addition  Addition  Inge Addition  Inge Addition  Inge Addition  Inge Addition  Inge Addition	atement for the purpose of cha I hereby accept the appointment	n's board of directors. I he	utes, the above-named corporation authorized by the corporation lorida Statutes.  TE: Registered Agent signature required  13.  1.1 TITLE  12 NAME  13 STREET ADDRESS  14 CITY-ST-ZIP  2.1 TITLE  22 NAME  23 STREET ADDRESS  2.4 CITY-ST-ZIP  31 TITLE  32 NAME  33 STREET ADDRESS  34 CITY-ST-ZIP  41 TITLE  4 2 NAME  4.3 STREET ADDRESS  3.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP  5.1 TITLE  5.3 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP	da. Such change was a f. Section 607.0505, Flo  If applicable (NOTE  COTORS  DELETE  EVAR  DELETE  DELETE  DELETE	name of registered agent and OFFICERS AND D  Brenda F gling Boul , FL 3423 , Herbert	office or registered agent, or agent. I am familiar with, and NATURE  PD Schimmel 2831 Rin Sarasota STD Schimmel 2831 Rin Sarasota STD Schimmel 37.2P Schimmel 57.2P Schimmel 58.31 Rin Sarasota STD Schimmel 58.31 Rin Sarasota STD Schimmel 58.31 Rin 58.32P Schimmel 58.31 Rin 58.32P	office or agent. I a SIGNATURE  12.  111.E  NAME  STREET ADDRESS CITY-ST-ZIP TITLE  NAME  STREET ADDRESS CITY-ST-ZIP
STREET ADDRESS 63 STREET ADDRESS	as registered  COTORS IN 12  Inge Addition  Addition  Inge Addition  Inge Addition  Inge Addition  Inge Addition  Inge Addition	atement for the purpose of cha I hereby accept the appointment	n's board of directors. I he	utes, the above-named corporation authorized by the corporation lorida Statutes.  TE: Registered Agent signature required  13.  1.1 TITLE  12 NAME  13 STREET ADDRESS  14 CITY-ST-ZIP  2.1 TITLE  22 NAME  23 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  32 NAME  33 STREET ADDRESS  34 CITY-ST-ZIP  41 TITLE  4 2 NAME  4.3 STREET ADDRESS  - 44 CITY-ST-ZIP  5.1 TITLE  5 2 NAME  5 3 STREET ADDRESS  5 4 CITY-ST-ZIP  6.1 TITLE	da. Such change was a f. Section 607.0505, Flo  If applicable (NOTE  COTORS  DELETE  EVAR  DELETE  DELETE  DELETE	name of registered agent and OFFICERS AND D  Brenda F gling Boul , FL 3423 , Herbert	office or registered agent, or agent. I am familiar with, and NATURE  PD Schimmel 2831 Rin Sarasota STD Schimmel 2831 Rin Sarasota STD Schimmel 3831 Rin Sarasota STD Schimmel 2831 Rin Sarasota STD Schimmel 2831 Rin Schimmel 2831	office or agent. I a SIGNATURE  12.  SIGNATURE  12.  TITLE  NAME  STREET ADDRESS CITY-ST-ZIP TITLE  NAME

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, with all other like empowered.

Rrenda H. Schimmel.

64 CITY-ST-ZIP

SIGNATURE: 1

CITY-ST-ZiP

Brenda H. Schimmel 4/17/99
SIGNING OFFICER OF DIRECTOR