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 #

101042

(0)

STEWARD-MELLON CO

FILED Mar 20 1998 8:00am Secretary of State

00/05/00

(012) 624 2E77

Principal Place of Business Mailing Address					i amaifit tiber Abitt siffat marit milita i	.64 61641 61614	MINIS NINIS	icani alahi saai
5101 E HILLSBOROUGH AVE. 5101 E HILLSBORO TAMPA FL 33610 TAMPA FL 33610			SH AVE.		DO NOT WRITE	E IN THIS (SPACE	
					3. Date Incorporated or Qualified			
					08/14/1925			
2. Principal Place of Business 2a. Mailing Addre			3		4. FEI Number			Applied For
21		26		59-0523805			Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & Stat	te	City & State			6. Election Campaign Financing	_	+	O May Be
23		28	C		Trust Fund Contribution			d to Fees
Zip	Country	Zip	Count	У	8. This corporation owes or has p	-	rentyear l Yes	Intangible No
24	25 Same and Address of Current		30		Personal Property Tax due June 10. Name and Address of New Ro			LJ NO
ALA		riogistores rigoni	8	Name	IV. Home and Address of Nov III	3.0.0.0.0	180111	
NAUGLE, JOHN N 5101 E. HILLSBOROUGH AVE.			L					
	MPA FL 33610		82	2 Street A	Address (P.O. Box Number is Not Accepta	(ela		
IA	WIFA FL 33010		83	3				
			Ĺ					
			84	City		FL	85 Zip	p Code
11 Pursuant	to the provisions of Sections 607 0502	and 607 1508. Florida Statuti	es the sho	re-named o	corporation submits this statement for the		changing	its registered
office or agent. I a	registered agent, or both, in the State o am familiar with, and accept the obligat	of Florida. Such change was a	authorized b	y the corpo	oration's board of directors. I hereby acce	pt the app	ointment a	as registered
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	Registered A	gent signature r	required when reinstating)	DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFI	CERS AND	DIRECTO	
TITLE	VPS	☐ DELETE	1.1 TITLE	l			Change	e 🔲 Addition
NAME	NAUGLE, MARK J		1.2 NAME					
STREET ADDRESS	5101 E. HILLSBOROUGH AVE		1.3 STREE	T ADDRESS				
CITY-ST-ZIP	TAMPA FL		1.4 CITY - ST - ZIP					
TITLE	SC	☐ DELETE	2.1 TITLE	!			Change	e
NAME	NAUGLE, JOHN H		2.2 NAME					
STREET ADDRESS	5101 E. HILLSBOROUGH AVE		2.3 STREE	T ADDRESS				
CITY-ST-ZIP	TAMPA FL		2. 4 CITY - ST - ZIP					
TITLE	CP	☐ DELETE	3.1 TITLE				Change	e
NAME	NAUGLE, JOHN H		3.2 NAME	i				
STREET ADDRESS	5101 E. HILLSBOROUGH AVE			T ADDRESS				
CITY+ST-ZIP	TAMPA FL	T DELETE	3.4. CITY-	ST-ZIP			<u> </u>	
TITLE	D NAUGIE MADY I	☐ DELETE	4.1 TITLE				L. Change	Addition
NAME	NAUGLE, MARK J		4, 2 NAME					
STREET ADDRESS	5101 E HILLSBOROUGH AVE			T ADDRESS				
CITY-ST-ZIP	TAMPA FL	DELETE	4.4 CITY-	ST-ZIP			05	Address
TITLE		☐ DELETE	5.1 TITLE	i		l	L Change	Addition
NAME			5.2 NAME	j				
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - 6.1 TITLE	SI-ZIP			Change	Addition
NAME		becele	6.2 NAME	1		'	LLI CHANGO	La radition
STREET ADORESS	,			T ADDRESS				
				i				
CITY-ST-ZIP	L certify that the information supplied with	this filing does not qualify for	6.4 CiTY-		in Section 119.07(3)(i). Florida Statutes I	further cer	tify that th	ne information
officer or	on this annual report or supplemental a director of the corporation or the receiv or Block 13 if changed, on an attach	ver or trustea empowered to e	urate and the execute this	nat my sign report as r	d in Section 119.07(3)(i), Florida Statutes I lature shall have the same legal effect as i required by Chapter 607, Florida Statutes;	made und and that m	ler oath; to y name a	hat I am an ippears in