## 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 # 155214

(0)

ABBOTT MILITARY TAILORS INC

FILED Jan 29 1998 8:00am Secretary of State

- 1 LO <b>1 1 U</b>   1 LO D   B   LO B   B   B   B   B   B   B   B   B   B	100 &    ILOLI   BERE REGEL BLUE!	

Principal Pla	ace of Business	Mailing Address				
1 .						
200 S. PALAFOX STREET 200 S. PALAFOX STREET PENSACOLA FL 32501 PENSACOLA FL 32501						
FENSAGOL	A FL 32301	PENSACULA FE	32301			DO NOT WRITE IN THIS SPACE
{						3. Date Incorporated or Qualified
1						06/18/1948
2. Principal	I Place of Business	2a. Mailing Addr	ess			4. FEI Number Applied For
21		26				<b>59-0597608</b> Not Applicab
Suite, Ap	ot. #, etc.	Suite, Apt. #,	etc.			SS 75 Additional
22		27				5. Certificate of Status Desired Fee Required
City & St	tate	City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution   Added to Fees
Zip	Country	Zip	C	untry		8. This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30. 🛛 Yes 🔲 No
	9. Name and Address of C	urrent Registered Agent		$\Box$		10. Name and Address of New Registered Agent
N	VARREN JR.W H			81	Name	
2	00 S. PALAFOX ST.			-	Chun t Antal	In a Constitution of New Assessments
	ENSACOLA FL			82	Street Add	Iress (P.O. Box Number Is Not Acceptable)
,	2.70.1002.72			83		
j					Ì	
				84	City	85 Zip Code
				ᆜ_	l	
agent.     SIGNATURE	E					poration submits this statement for the purpose of changing its registere- tion's board of directors. I hereby accept the appointment as registered
12.	Signature, typed or printed name of registe		(NOTE: Registe	<u> </u>	int signature requi	ited when reinstating)  DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
	T PD OFFICER	IS AND DIRECTORS			· ,	ADDITIONS/CHANGES TO OFFICERS AND DIFFECTORS IN 12
TITLE	WARREN JR,W H	L VE	,,,,	TITLE	Į	
NAME	AND C DALAFOY OTHER	r	• • • • • • • • • • • • • • • • • • • •	NAME	}	
STREET ADDRES	PENSACOLA FL	ı	<b>I</b>		ADDRESS	
CITY-ST-ZIP				CITY - S	T-ZIP	
TITLE	STD NAMOV IV	□ DE		TITLE		Change Addition
NAME	OWENS, NANCY W.	<del>-</del>	2.2	NAME	}	
STREET ADDRES		l	2.3	STREET	ADDRESS	r *******
CITY-ST-ZIP	PENSACOLA FL			CITY-	ST-ZIP	
TITLE	d de la companya de l	DE		TITLE		☐ Change ☐ Addition
NAME	]		3.2	NAME		
STREET ADDRES	s		3.3	STREET	ADDRESS	
CITY-ST-ZIP			3.4	CITY-S	ST-ZiP	
TITLE		L DE	LETE 4.1	TITLE		Change Addition
NAME	1		4. 2	NAME		
STREET ADDRES	s l		4.3	STREET	ADDRESS	
CITY-ST-ZIP	·· }			CITY-S	,	
TITLE	<del>                                     </del>	DE		TITLE		Change Additio
NAME	}	_,		NAME		
STREET ADDRESS	_1					
CITY - ST - 71P	S		1	STREET CITY-S	ADDRESS	

City-st-ZIP

14. I hereby certify that the information supplied with this filling 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 chapted, or on an attachment with an address.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

DELETE

SIGNATURE

TITLE

NAME

STREET ADDRESS

lancis I. Water Sylancy W. Dwers 1/22/98 (850) 438-986

72E034 (10/97)

Change

Addition