## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

**FILED** Feb 10 1998 8:00am Secretary of State

" ' ' ' ' '	MENT # 172665 FTH AVENUE NORTH INCOM	` '			
Principal Place of Business		Mailing Address			
735 5TH AVENUE. N		735 5TH AVENUE, N.			
ST. PETERSBURG FL 33701		APT #8		DO NOT WRITE IN THIS SPACE	
US		ST. PETERSBURG FL 3 US	3701	3. Date Incorporated or Qualified	<del></del>
<b>[</b>		••		03/10/1953	
	Place of Business	2a. Mailing Address			ed For
21		26		65-0029856 Not A	pplicable
Suite, Ap1 #, etc.		Suite, Apl. #, etc.		6. Certificate of Status Desired \$8.75 Add	
City & State		Cily & State		Fee Requi	
23		28		8. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country	Z(p)	Country	This corporation owes or has paid the current year Intang	
24	25	29	30	Personal Property Tax due June 30.  Yes XN	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
1	AINE FINNEY		81 Name		
735 5TH AVENUE, N.			82 Street A	Address (P.O. Box Number is Not Acceptable)	
APT #8					
ST	. Petersburg FL 33701		63		ŀ
			64 City	85 Zip Cod	e
11 Pursuant	to the provisions of Sections 607 0503	2 and 607 1509 Florida State	ttes the shows named	FL 3 2000	- mintered
office or r	registered agent, or both, in the State of	of Florida. Such change was	authorized by the corp	corporation submits this statement for the purpose of changing its re- oration's board of directors. I hereby accept the appointment as reg	istered
I	arriamilar war, and accept the conga	idons di, section 607.0505, F	ionoa Statutes.		
SIGNATURE	Signature, typod or printed name of registered agor	it and trie it applicable (NC	TF: Registered Agent signature r	required when reinstating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	N 12
TITLE	PD	☐ DELETE	1.1 TITLE	☐ Change ☐	Addition
NAME	HENRY, JAMES	-	1.2 NAME		
STREET ADDRESS	733 FIFTH AVE NORTH APT.	0	1.3 STREET ADDRESS		ļį
CITY-ST-ZIP TITLE	ST PETERSBURG FL D	DELETE	1.4 CITY-ST-ZIP 2 1 TITLE	☑ Change □	Addition
NAME	BRUCE CALKIN	C DECENT	<b>I</b>	•	ין ואוויטטא ב
STREET ADDRESS	425 CAROLINE STREET		2.3 STREET ADDRESS	4000 Durrand St Apt 10	
CITY-ST-ZIP	KEY WEST FL		2. 4 CITY-ST-ZIP	4000 Durrand St Apt 10 Metairie, LA 70001	
TITLE	STD	DELETE	3.1 TITLE	Change C	Addition
NAME	ELAINE FINNEY		3.2 NAME	· -	
STREET ADDRESS	735 5TH AVENUE, N. #8		3.3 STREET ADDRESS		
CITY-ST-ZIP	ST PETERSBURG FL		3.4 CITY-ST-ZIP		
TITLE	VD	☐ DELETE	4.1 TITLE	Change	Addition
NAME	DARK, RICHARD		4 2 NAME	•	
STREET ADDRESS	733 5TH AVE, N #3 ST PETERSBURG FL		4 3 STREET ADORESS		
CITY-ST-ZIP TITLE	D D	DELETE	44 CITY-ST-ZIP 51 TITLE	Change	Addition
NAME	FAULK, GARY	the period	5.2 NAME	. Change C.	- AGONION
STREET ADDRESS	733 5TH AVE, N #6		5.3 STREET ADDRESS		
CITY-ST-ZIP	ST. PETERSBURG FL		5.4 CITY-ST-ZIP		
TITLE		DELETE	61 TITLE	Change C	Addition
NAME			6.2 NAME		-
STREET ADDRESS			6.3 STREET ADDRESS		1
CITY-ST-ZIP			6.4 CITY - ST - ZIP		ŀ

14. 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 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 of 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.

(8/3) 898-5086 or