	ROFIT	ST AL	FLOF	RIDA DEP/	ARTMENT OF ST	ATE	Jul 07 1	999	8 8·1)()an
	PO RA TIC				B. Mortham					
1998		Secretary of State DIVISION OF CORPORATIONS			Secretary of State					
		# 232270	()	9)						
ANDERS	on e nte	RPRISES INC OF	TAMPA	•						
		·····								
rincipal Place of Busi ness 101 W MARINER 1MPA FL 33609			-	Mailing Address 5701 W MARINER TAMPA FL 33609						
							DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualified			
Principal Pl	lace of Busine	355	2a. Mailing Ad	ddress			01/18/1961 4. FEI Number		A	pplied For
Suite, Apt. :	# eta		26 Suite, Apt	# etc			<u>59-0912825</u>			ot Applicable Additional
			27				5. Certificate of Status Desired			equired
City & State	ê		City & Sta	ate			6. Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip		Country 25	Zip		Country 30		8. This corporation owes or has personal Property Tax due Ju		irrent year In	
		and Address of Current		nt	81 N		10. Name and Address of New F			
	W. Marini Pa fil 3360	er, apt. #404 9			83		ess (P.O. Box Number is Not Accept	able)		
Pursuant office or r	PA FL 3360	9 ons of sections 607.0502 ant, or both, in the State	and 607.1508, Fic of Florida. Such ch	orida Statut	83 84 C tes, the above-nam authorized by the	lity	ass (P.O. Box Number is Not Accept ation submits this statement for the p n's board of directors. I hereby accep	FI		Code egistered egistered
Pursuant office or r agent. I a GNATURE	to the provisi registered agr am familiar wi	9 ons of sections 607.0502 ant, or both, in the State th, and accept the obliga	tions of eaction 6	orida Statul hange was 07:0505, F	83 84 C authorized by the original Statutes.	tity ned corpora corporatio	ation submits this statement for the p n's board of directors. I hereby accep	FI		
TAME	to the provisi registered agr am familiar wi Signature, typed o	9 ons of sections 607.0502 ant, or both, in the State h, and accept the obliga	and tille if applicable	orida Statui hange was 07.0505, F	83 84 C tes, the above-nam authorized by the	tity ned corpora corporatio	ation submits this statement for the p n's board of directors. I hereby accep	FI urpose of c of the appo	changing its re changing its r	egistered egistered
Pursuant office or r agent. I a GNATURE _	to the provisi registered agam familiar wi Signature, typed of VP	9 ons of sections 607.0502 ant, or both, in the State th, and scrapt the obliga privided name of registered agent OFFICERS AN	and tille if applicable	orida Statut hange was 0/0505, F	83 84 C tes, the above-nar authorized by the ordia Statutes. OTE: Registered Agent 13. 1.1 TITLE	tity ned corpora corporatio	ation submits this statement for the p n's board of directors. I hereby accep red when reinstating)	FI urpose of c of the appo	changing its re changing its r	egistered egistered
Pursuant office or r agent. I a GNATURE _ 	to the provisi registered aga am familiar wi Signature, typed of VP ANDERSO 5701 W M	9 ons of sections 607.0502 ant, or both, in the State th, and accept the obliga of FICERS AND OFFICERS AND N, EMMETT T., JR. ARINER	and tille if applicable	07.0505, F	83 84 C tes, the above-nar authorized by the priva Statutes. OTE: Registered Agent 13.	tity med corporatio corporatio	ation submits this statement for the p n's board of directors. I hereby accep red when reinstating)	FI urpose of c of the appo	changing its re olntment as re 2-/98	egistered egistered
TAME	to the provisi registered again familiar wi Signature, typed of VP ANDERSO 5701 W M TAMPA FL	9 ons of sections 607.0502 ant, or both, in the State th, and accept the obliga of FICERS AND OFFICERS AND N, EMMETT T., JR. ARINER	and tille if applicable	DELETE	B3 B4 C tes, the above-nar authorized by the mila Statutes. OTE: Registered Agent 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP	tity med corporatio corporatio	ation submits this statement for the p n's board of directors. I hereby accep red when reinstating)	FI urpose of c of the appo	Analysis is reaction of the second se	egistered egistered
Pursuant office or r agent. I a GNATURE E KEET ADDRESS Y-ST-ZIP .E	to the provisi registered aga am familiar wi Signature, typed VP ANDERSO 5701 W M TAMPA FL PS	9 ons of sections 607.0502 ant, or both, in the State th, and accept the obliga of FICERS ANI OFFICERS ANI N, EMMETT T., JR. ARINER	and tille if applicable	07.0505, F	83 84 C tes, the above-name authorized by the prija Statutes, OTE: Registered Agent 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD	tity med corporatio corporatio	ation submits this statement for the p n's board of directors. I hereby accep red when reinstating)	FI urpose of c of the appo	changing its re olntment as re 2-/98	egistered egistered
Pursuant office or r agent. I a GNATURE E E E E E E E E E E E E E E E E E E	to the provisi registered again familiar wi Signature, typed of VP ANDERSO 5701 W M TAMPA FL PS ANDERSO 5701 W M	9 ons of sections 607.0502 ant, or both, in the State th, and accept the obligated ofFiCERS AND OFFICERS AND N, EMMETT T., JR. ARINER N, JAMIE S. ARINER	and tille if applicable	DELETE	83 84 C authorized by the antia Statutes. OTE: Registered Agent 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE	Sity med corportio signature requi	ation submits this statement for the p n's board of directors. I hereby accep red when reinstating)	FI urpose of c of the appo	Analysis is reaction of the second se	egistered egistered ORS IN 12 Addition
Pursuant office or r agent. I a GNATURE _	to the provisi- registered aga am familiar wi Signature, typed of VP ANDERSO 5701 W M TAMPA FL PS ANDERSO	9 ons of sections 607.0502 ant, or both, in the State th, and accept the obligated ofFiCERS AND OFFICERS AND N, EMMETT T., JR. ARINER N, JAMIE S. ARINER	and tile if applicable	DELETE	83 84 C authorized by the authorized by the rata Statutes. OTE: Registered Agent 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADD 2.4 CITY-ST-ZIP	Dity med corporatio corporatio	ation submits this statement for the p n's board of directors. I hereby accep red when reinstating)	FI urpose of c of the appo	hanging its re- hanging its re- lintment as r	DRS IN 12 Addition
Pursuant office or r agent. I a GNATURE	to the provisi registered again familiar wi Signature, typed of VP ANDERSO 5701 W M TAMPA FL PS ANDERSO 5701 W M	9 ons of sections 607.0502 ant, or both, in the State th, and accept the obligated ofFiCERS AND OFFICERS AND N, EMMETT T., JR. ARINER N, JAMIE S. ARINER	and tile if applicable	DELETE	83 84 C authorized by the authorized by the rata Statutes. OTE: Registered Agent 13. 1.1 TITLE 12 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE 2 NAME 2.3 STREET ADD 2.4 CITY-ST-ZIP 3.1 TITLE	Dity med corporatio corporatio	ation submits this statement for the p n's board of directors. I hereby accep red when reinstating)	FI urpose of c of the appo	Analysis is reaction of the second se	egistered egistered ORS IN 12 Addition
Pursuant office or r agent. I a GNATURE	to the provisi registered again familiar wi Signature, typed of VP ANDERSO 5701 W M TAMPA FL PS ANDERSO 5701 W M	9 ons of sections 607.0502 ant, or both, in the State th, and accept the obligated ofFiCERS AND OFFICERS AND N, EMMETT T., JR. ARINER N, JAMIE S. ARINER	and tile if applicable	DELETE	83 84 C authorized by the authorized by the rata Statutes. OTE: Registered Agent 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADD 2.4 CITY-ST-ZIP	Sity med corporatio corporatio	ation submits this statement for the p n's board of directors. I hereby accep red when reinstating)	FI urpose of c of the appo	hanging its re- hanging its re- lintment as r	DRS IN 12 Addition
Consuent office or r agent. I a GNATURE E E E E E E E E E E E E E E E E E E	to the provisi registered again familiar wi Signature, typed of VP ANDERSO 5701 W M TAMPA FL PS ANDERSO 5701 W M	9 ons of sections 607.0502 ant, or both, in the State th, and accept the obligated ofFiCERS AND OFFICERS AND N, EMMETT T., JR. ARINER N, JAMIE S. ARINER	and tile if applicable	DELETE	83 84 C authorized by the prina Statutes. STE: Registered Agent 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE 2.3 STREET ADD 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	Sity med corporatio corporatio signature requi	ation submits this statement for the p n's board of directors. I hereby accep red when reinstating)	FI urpose of c of the appo	hanging its re- hanging its re- lintment as r	DRS IN 12 Addition
TAME Pursuant office or r agant. I a GNATURE E E E E E E E E E E E E E	to the provisi registered again familiar wi Signature, typed of VP ANDERSO 5701 W M TAMPA FL PS ANDERSO 5701 W M	9 ons of sections 607.0502 ant, or both, in the State th, and accept the obligated ofFiCERS AND OFFICERS AND N, EMMETT T., JR. ARINER N, JAMIE S. ARINER	and tile if applicable	DELETE	83 84 C authorized by the authorized by the raria Statutes. DTE: Registered Agent 13. 1.1 TITLE 12 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADD 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADD 3.4 CITY-ST-ZIP 4.1 TITLE	Sity med corporatio corporatio signature requi	ation submits this statement for the p n's board of directors. I hereby accep red when reinstating)	FI urpose of c of the appo	hanging its re- hanging its re- lintment as r	DRS IN 12 Addition
TAME Pursuant office or r agant. I a GNATURE _ E E EET ADDRESS (-ST-ZIP E EET ADDRESS (-ST-ZIP E EET ADDRESS (-ST-ZIP E E E E E E E E E E E E E	to the provisi registered again familiar wi Signature, typed of VP ANDERSO 5701 W M TAMPA FL PS ANDERSO 5701 W M	9 ons of sections 607.0502 ant, or both, in the State th, and accept the obligated ofFiCERS AND OFFICERS AND N, EMMETT T., JR. ARINER N, JAMIE S. ARINER	and tile if applicable	DELETE	83 84 C authorized by the authorized by the rma Statutes. DTE: Registered Agent 13. 1.1 TITLE 12 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADD 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADD 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 3.3 STREET ADD 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME	Sity med corportio	ation submits this statement for the p n's board of directors. I hereby accep red when reinstating)	FI urpose of c of the appo	hanging its re- hanging its re- lintment as r	egistered gistered ORS IN 12 Addition
TAME	to the provisi registered again familiar wi Signature, typed of VP ANDERSO 5701 W M TAMPA FL PS ANDERSO 5701 W M	9 ons of sections 607.0502 ant, or both, in the State th, and accept the obligated ofFiCERS AND OFFICERS AND N, EMMETT T., JR. ARINER N, JAMIE S. ARINER	and tile if applicable	DELETE	83 84 C authorized by the authorized by the raria Statutes. DTE: Registered Agent 13. 1.1 TITLE 12 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADD 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADD 3.4 CITY-ST-ZIP 4.1 TITLE	Sity med corportio	ation submits this statement for the p n's board of directors. I hereby accep red when reinstating)	FI urpose of c of the appo	hanging its re- hanging its re- lintment as r	egistered gistered ORS IN 12 Addition
TAME Pursuant office or r agant. 1 a GNATURE _ 	to the provisi registered again familiar wi Signature, typed of VP ANDERSO 5701 W M TAMPA FL PS ANDERSO 5701 W M	9 ons of sections 607.0502 ant, or both, in the State th, and accept the obligated ofFiCERS AND OFFICERS AND N, EMMETT T., JR. ARINER N, JAMIE S. ARINER	and tile if applicable	DELETE	83 84 C authorized by the prida Statutes. DTE: Registered Agent 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADD 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADD 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 3.3 STREET ADD 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADD	Sity med corportio	ation submits this statement for the p n's board of directors. I hereby accep red when reinstating)	FI urpose of c of the appo	hanging its re- hanging its re- lintment as r	egistered gistered ORS IN 12 Addition
TAME Pursuant office or r agent. 1 a GNATURE _	to the provisi registered again familiar wi Signature, typed of VP ANDERSO 5701 W M TAMPA FL PS ANDERSO 5701 W M	9 ons of sections 607.0502 ant, or both, in the State th, and accept the obligated ofFiCERS AND OFFICERS AND N, EMMETT T., JR. ARINER N, JAMIE S. ARINER	and tile if applicable	DELETE DELETE DELETE	B3 B4 C authorized by the prida Statutes. DTE: Registered Agent 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADD 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADD 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADD 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADD 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	Sity med corporatio corporatio signature requi	ation submits this statement for the p n's board of directors. I hereby accep red when reinstating)	FI urpose of c of the appo	hanging its re- hanging its re- lintment as r	egistered gistered ORS IN 12 Addition
TAME Pursuant office or r agent. 1 a GNATURE	to the provisi registered again familiar wi Signature, typed of VP ANDERSO 5701 W M TAMPA FL PS ANDERSO 5701 W M	9 ons of sections 607.0502 ant, or both, in the State th, and accept the obligated ofFiCERS AND OFFICERS AND N, EMMETT T., JR. ARINER N, JAMIE S. ARINER	and tile if applicable	DELETE DELETE DELETE	B3 B4 C authorized by the prida Statutes. DTE: Registered Agent 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADD 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADD 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADD 3.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADD 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADD	Sity med corporatio corporatio signature requi	ation submits this statement for the p n's board of directors. I hereby accep red when reinstating)	FI urpose of c of the appo	hanging its re- hanging its re- lintment as r	egistered gistered ORS IN 12 Addition
TAME Pursuant office or r agant. 1 a GNATURE	to the provisi registered again familiar wi Signature, typed of VP ANDERSO 5701 W M TAMPA FL PS ANDERSO 5701 W M	9 ons of sections 607.0502 ant, or both, in the State th, and accept the obligated ofFiCERS AND OFFICERS AND N, EMMETT T., JR. ARINER N, JAMIE S. ARINER	tions of exciton 6	DELETE DELETE DELETE DELETE	B3 B4 C authorized by the prida Statutes. DTE: Registered Agent 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADD 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADD 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADD 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADD 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	Sity med corporatio corporatio signature requi	ation submits this statement for the p m's board of directors. I hereby accept red when reinstating) ADDITIONS/CHANGES TO OF	FI urpose of c of the appo oare FICERS A		egistered gistered ORS IN 12 Addition Addition Addition
TAME	to the provisi registered again familiar wi Signature, typed of VP ANDERSO 5701 W M TAMPA FL PS ANDERSO 5701 W M	9 ons of sections 607.0502 ant, or both, in the State th, and accept the obligated ofFiCERS AND OFFICERS AND N, EMMETT T., JR. ARINER N, JAMIE S. ARINER	tions of exciton 6	DELETE DELETE DELETE	83 84 C authorized by the authorized by the rata Statutes. DTE: Registered Agent 13. 1.1 TITLE 12 NAME 1.3 STREET ADD 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADD 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADD 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADD 3.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADD 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADD 5.4 CITY-ST-ZIP	Sity med corporatio corporatio signature requi	ation submits this statement for the p n's board of directors. I hereby accept red when reinstating) ADDITIONS/CHANGES TO OF	FI urpose of c of the appo oare FICERS A	hanging its replantment as replantm	egistered gistered ORS IN 12 Addition
TAME	to the provisi registered again familiar wi Signature, typed of VP ANDERSO 5701 W M TAMPA FL PS ANDERSO 5701 W M	9 ons of sections 607.0502 ant, or both, in the State th, and accept the obligated ofFiCERS AND OFFICERS AND N, EMMETT T., JR. ARINER N, JAMIE S. ARINER	tions of exciton 6	DELETE DELETE DELETE DELETE	B3 B4 C B5 C B4 C B4 C B5 C B4 C B4 C B5 C B4 C B4 C B4 C B5 C B4 C B4 C B5 C B4 C B4 C <td>Sity med corporatio corporatio signifure requi</td> <td>ation submits this statement for the p m's board of directors. I hereby accept red when reinstating) ADDITIONS/CHANGES TO OF</td> <td>FI urpose of c of the appo oare FICERS A</td> <td>hanging its replantment as replantm</td> <td>egistered gistered ORS IN 12 Addition Addition Addition</td>	Sity med corporatio corporatio signifure requi	ation submits this statement for the p m's board of directors. I hereby accept red when reinstating) ADDITIONS/CHANGES TO OF	FI urpose of c of the appo oare FICERS A	hanging its replantment as replantm	egistered gistered ORS IN 12 Addition Addition Addition

Anderson Enterprises

5701 Mariner Ave #404 Tampa, FL 33609 813-286-7398

7-2-98

Division of Corporations

Annual Report Filing

P.O. Box 6327

Tallahassee, Fl 32314

Gentlemen:

Attached is the report for filing. I noticed on the enevelope that it said second notice. Please be advised that we never got the first notice. I called Tallahassee yesterday, and they said to send in the payment right away, and write a letter stating that we did not receive the first notice.

Sincerely,

Vice-President

Anderson Enterprises T. Emmett Anderson, Jr.