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

PROFIT CORPORATION ANNUAL REPORT

を動から、1分子がある。「教養は多りにもないなどを実力に収め出来がおければ、おければ日本は、近にはなるははかの場合とはできる。これでは素素のも実力にありなりなりなりなりない。 10日の日本のでは、10日



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 28 1998 8:00am Secretary of State

	1998	DIVISION OF	CORPOR	IATIO	NS ———				
ł	MENT # 284690 & ASSOCIATES, INC.	(5)						H <b>318</b> 11 1831	
Principal Place	e of Business	Mailing Address							
		5							
4302 E 10TH   SUITE C304	AVE	4302 E 10TH AVE Suite C304							
TAMPA FL 39	605	TAMPA FL 33605				DO NOT WRITE IN THIS SPACE			
U\$		US	05			3. Date Incorporated or Qualified  OR/24/4064			
2. Principal P	lace of Business	2a. Mailing Address				08/31/1964 4. FEI Number	TAI	pplied For	-
21		26				59-1056932	<del>  </del>	ot Applicable	1
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional	1
22		27		<b></b> .		5. Certificate of Status Desired		equired	
City & State	Э	City & State				8. Election Campaign Financing		May Be	
Zip	Country	Zip Country				Trust Fund Contribution		to Fees	┥
24	25 Country	29	30	arttry		<ol> <li>This corporation owes or has paid the current Personal Property Tax due June 30.</li> </ol>	<b>~</b> · -	langible No	
<u> </u>	9. Name and Address of Current		30	<u> </u>		10, Name and Address of New Registered		7 140	1
.101	NER, JT			B1	Name				1
	2 E 10TH AVE			82	Street Ad	dress (P.O. Box Number is Not Acceptable)			1
SUITE C304									
TAN	MPA FL 33605			83					
			i	84	City		<b>85</b> Zip (	Code	1
dd Burguent	to the provisions of Costions COZ DEDS	and 602 1500. Florida Ctatu	too the el	have		FL			]
office or re	e <b>gistered</b> agent, or both, in the State of	of Florida, Such change was	tes, the at authorize	d by	-named co the corpor	rporation submits this statement for the purpose of ation's board of directors. I hereby accept the app	oranging it pointment as	registered	
ĺ	m lamiliar with, and accept the obliga	tions of, Section 607.0505, Ft	lorida Stat	tutes.					İ
SIGNATURE	Signature typed or printed namic of registered agen	t and title if applicable (NO)	f: Registere	d Apen	it signature req	uired when reinstating) DATE			1_
12.	OFFICERS AND					ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR	S IN 12	3
TITLE	PD	DELETE	1.1 30	1.1 TITLE			Change	Addition	15
NAME	JOINER,J T	•	12 NAME						2
STREET ADDRESS	4302 E 10TH AVENUE SUITE	C304	1.3 STREET ADDRESS		ı				Ĭř
CITY-ST-ZIP TITLE	TAMPA_FL D	DELETE	2.1 TI	11Y-ST	- ZIP		Change	Addition	∤ġ
NAME	JOINER,MARTHA W	נ טנננונ	2.1 N				L_1 Change		
STREET ADDRESS	4302 E 10 AVENUE SUITE C3	M			ADDRESS				
CITY-ST-ZIP	TAMPA FL	/A	•	::::::::::::::::::::::::::::::::::::::	ſ				1
TITLE		DELETE	3.1 TITLE		-		Change	Addition	1
NAME			3.2 NA	AME	1				ĺ
STREET ADDRESS			3.3 ST	TREET A	ADDRESS				1
CITY-ST-ZIP				ITY - \$1	r-ZIP		-		
TITLE		☐ DELETE	4.1 101				Change	Addition	
NAME			4. 2 N						1
STREET ADDRESS			- 1		ADDRESS				1
CITY-ST-ZIP TITLE	DELETE		_	5.1 TITLE		***************************************	Change	Addition	┨
NAME		المعادد الم	5.2 NAME		1		Creatigo		
STREET ADDRESS			5.3 STREET ADDRESS		ADDRESS				
CITY-\$1-ZIP			5.4 CITY-ST-ZIP						
TITLE		☐ DELETE	61 Tr				Change	Addition	1
NAME			6.2 NA	AME	1				
STREET ADDRESS			6.3 \$1	IREET A	ADDRESS				
CITY-ST-ZIP	artify that the information supplied we	h this filing dose not qualify t		IY-SI		in Section 119,07(3)(i), Florida Statutes. I further c	ortifu that the	information	1
ima, πιοιουγί	rentary area to compaction of the publication of the contraction of th	er arma mining Group HOL QUAINY I	OF BITC DAE	الإنتين	Un blatou !	iii soodon ii tajortojur iildiida olalulas. Hulliibi C	orany unature	THOUGHDAUGE)	1

4. 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, oc on an attachment with an address.

CNIATURE: TO WILL TO WILL

1/12/98