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

PROFIT CORPORATION ANNUAL REPORT 1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 350865

(2)

**OUTLAW'S INTERIORS, INC.** 

**FILED** Apr 24 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				( 140100 HINN BAİĞI DONU IDINE BAHA DAN	- C MADICO HITRI BRIMA DONDI NGILE BRIAFI BRAH DIDIN BRUTA BIBHI DIDIN DIDIN DIDIN DIDIN DIDIN	
3416 S DALE TAMPA FL 33 US		3416 S DALE MABRY HW TAMPA FL 33629 US	Υ	DO NOT WRITE IN 3. Date Incorporated or Qualified	DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified	
				08/15/1969		
2. Principal P	Place of Business	2s. Mailing Address		4. FEI Number	Applied For	
21		26		59-1272340	Not Applicable	
Suite, Apt	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	е	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be	
Zip	Country	Zip	Country	Trust Fund Contribution  8. This corporation owes or has paid the		
24	25	— · · I	30	Personal Property Tax due June 30.		
	g. Name and Address of Curren			10. Name and Address of New Regist		
OUTLAW,ARCHIE WILLARD 704 BRADDOCK TAMPA FL 33603				81 Name Caro / Out / 2w 82 Street Address (P.O. Box Number is Not Acceptable) 704 W Braddeck 83 Tampa 84 City = 85 Zip Code		
11. Pursuant office or r agent. I a	registered agent, or both, in the State im familiar with, and accept the obligation of the state	of Florida Such change was a atjons of, Section 607,0505, Flo	es, the above-named uthorized by the corrida Statutes.  Registered Agent signature	corporation submits this statement for the purpoporation's board of directors. I hereby accept the property of	ose of changing its registered e appointment as registered	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS		
TITLE	PD	☐ DELETE	11 TITLE		☐ Change ☐ Addition	
NAME	OUTLAW, ARCHIE WILLARD		1.2 NAME		[7	
STREET ADORESS	704 BRADDOCK		1.3 STHEET ADDRESS		ļ.	
CITY-ST-ZIP	TAMPA FL	Destre	1.4 CITY-ST-ZIP		Nector Dates	
TITLE	CAROL Outlan	☐ DELETE	21 TITLE	VP	Change    Addition	
NAME (CA)	704 BRADDOCK	,	2 2 NAME	CAROL OUTLAW 104 Braddock		
1			2 3 STREET ADDRESS	TOT DIAGOON		
CITY-ST-ZIP TITLE	TAMPA FL S	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE	Tampa, FL 33603	Change Addition	
NAME	EWBANK, HAZEL		3.2 NAME			
STREET ADDRESS	4931 BAY WAY DRIVE		3.3 STREET ADDRESS			
CITY-S1-ZIP	TAMPA FL		3.4. CITY - ST - ZIP			
TITLE	1144.6.15	DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CHY-ST-ZIP			4.4 CITY - ST- ZIP			
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - ST - ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			64 CITY-ST-ZIP			

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 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, or on an attachment with an address

SIGNATURE: