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

1. Corporation Name

(7)

FILED Jan 21 1998 8:00am Secretary of State

| ACTIVE | INDVING & STURAGE GO | | | | | | | |
|--|--|--|---|---|--|---|------------------------------|-----------------------------------|
| Principal Place of Business Malling Address | | | | | | | #1941 G1811 E1811 E | 21911 GIGH (GE) |
| 900 NEW WARRINGTON RD 900 NEW WARRINGTON R | | | N RD | | - 1 | | | |
| PENSACOLA FL 32506 PENSACOLA FL 32506 | | | | | | 20 107 110175 111 | | |
| | | | | | - | DO NOT WRITE IN T | HIS SPACE | |
| | | | | | | Date Incorporated or Qualified 05/18/1970 | | |
| 2. Principal Place of Business 2a. Mailing Address | | | | | | 4. FEI Number | | Applied For |
| 21 | | 26 | | | | 59-1304912 | | Not Applicable |
| Suite, Apt. #, etc. Suite, Apt. #, etc. | | | | | | 5. Certificate of Status Desired | 7 | 5 Additional |
| 22 27 | | | | | | | Fee . | Required |
| City & Stat | е | City & State | | | | 6. Election Campaign Financing | | 00 May Be |
| 23 | | | | | | Trust Fund Contribution | Adde | ed to Fees |
| Zip | Country | Zip | ——∵ | Country | | 8. This corporation owes or has paid the | | |
| 24 | 25 | 29 | 30 | | | Personal Property Tax due June 30. | | □ No |
| | 9. Name and Address of Curren | it Registered Agent | | -1 · | | Name and Address of New Registe | red Agent | |
| 1 | rnandez, steven | | [ª | 1 Name | ı | | | İ |
| 902 NEW WARRINGTO RD | | | a | 82 Street Address (P.O. Box Number is Not Acceptable) | | | | |
| PENSACOLA FL 32506 | | | | dieer Address (F.O. Box Number is Not Acceptable) | | | | |
| | | | 8 | 3 | | | | |
| | | | 8 | 4 City | | | - 85 Zi | ip Code |
| | | | . 1 | 1 | | | -L ` | ' í |
| 11. Pursuant office or r | to the provisions of Sections 607.050 egistered agent, or both, in the State or familiar with, and accept the obligations. | 2 and 607.1508, Florida Sta of Florida. Such change wa ations of Section 607.0505. | tutes, the abo is authorized Florida Statut | ve-named by the corp es. | corpora poration | ation submits this statement for the purpor's board of directors. I hereby accept the | se of changing appointment a | j its registered as registered |
| SIGNATURE | The last that and accept the cong. | 20,010 01, 000101, 00, 20001 | Tionaa olaas | | | | | |
| SIGNATURE | Signature, typed or printed name of registered age | ent and title if applicable. (N | IOTE. Registered A | gent signature | e required w | rhen reinstating) DA | ſΕ | |
| 12. | OFFICERS AN | D DIRECTORS | 13. | · · | | ADDITIONS/CHANGES TO OFFICERS | | |
| TITLE | PD | DELETE | 1.1 TITLE | - | | | Change | e 🔲 Addition |
| NAME | HERNANDEZ, STEVEN | | 1.2 NAM | : | 1 | | | |
| STREET ADDRESS | 3451 RIVERINA DR | | 1,8 STRE | | | | | |
| CITY-ST-ZIP | PENSACOLA,FL 00000 | | 1.4 CITY | ST-ZIP | | | 32514 | i |
| TITLE | STD | DELETE | 2.† TITLE | | | | Change | e Addition |
| NAME | HERNANDEZ, BELINDA | | 2,2 NAM | • | | | | |
| STREET ADDRESS | 3451 RIVERINA DR | | 2.3 STRE | T ADDRESS | | | | |
| CITY-ST-ZIP | PENSACOLA,FL 00000 | | 2.4 CITY | | 1 | . 7 | 2514 | |
| TITLE | ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- · | DELETE | 3,1 TITLE | | | | ☐ Change | e Addition |
| NAME | | | 3,2 NAMI | | | | | |
| STREET ADDRESS | | | | Et address : | | | | 1 |
| | | | 3.4. CiTY | | 1 | | | |
| CITY-ST-ZIP TITLE | | DELETE | 4,1 TITLE | | | | Change | e Addition |
| NAME | | | 4.7 MAM | | 1 | | | |
| | | | | T ADDRESS | | | | 1 |
| STREET ADDRESS | | | | | | | | |
| CiTY-ST-ZIP | | DELETE | 4.4 CITY | | ļ | | Change | e Addition |
| TITLE | | ריין חברבוב | 5,1 TITLE | | | | ☐ Change | , Li Addiddii |
| NAME | | | 5.2 NAM | | | | | |
| STREET ADDRESS | | | 5.3 STRE | T ADDRESS | | | | |
| CITY-ST-ZIP | | | 5.4 CITY | | └ ── | | | |
| TITLE | | ☐ DELETE | 6.1 TITLE | | | | L Change | Addition |
| NAME | | | 6.2 NAME | | | | | 1 |
| STREET ADDRESS | | | 6.3 STRE | T ADDAESS | 1 | | | j |
| CITY - ST - ZIP | | | 6.4 CITY | | | | | |
| 14 I hereby o | ertity that the Information supplied wi | th this filling does not gualifi | for the evem | ntion state | ed in Sec | tion 119 07(3)(i) Florida Statutes, I furthe | r certify that th | ae Information |

Interest certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this annual report or supplied entire and an 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 of frusteet impowered 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 one an attachment with an address.