## 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

## **FILED** Mar 03 1998 8:00am Secretary of State

1. Corporati	INENI# 4770	)92 (1)			
	INCORPORATED	` '			
Di iit,	INOUTH CHAILD			t sauten arder ember anner Korin anne ann anne	(811 848)
ĺ					
Principal Pla	ce of Business	Mailing Address			(Q)) Q
1324 S. MAIN STREET		1234 S. MAIN STREET			
BELLE GLADE PL 33430		BELLE GLADE FL 33430			
US		US		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
ļ <u></u>	<del></del>			05/30/1975	
	Place of Business	2a. Maiting Address		4, FEI Number	Applied For
		Suite, Apt. #, etc.		59-1639509	Not Applicable
<del> </del>		· ·		5. Certificate of Status Desired	\$8.75 Additional Fee Required
22   27     City & State   City & State			6 Flashing Company Flaggeting		
23 28				6. Election Campaign Financing  Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	g. Name and Address of C	urrent Registered Agent		10. Name and Address of New Registers	
HII	LL, HOWARD E		81 Name		
1324 E MAIN ST			82 Street Ac	idress (P.O. Box Number is Not Acceptable)	
BELLE GLADE FL 33430					
			B3		
		_	84 City		85 Zip Code
				F	
11. Pursuant office or	to the provisions of Sections 60 registered agent, or both, in the	720502 and 607.1608, Florida Statut State of Florida Such shappe was	ies, the above-named co	orporation submits this statement for the purpose ration's board of directors. I hereby accept the a	of changing its registered
agent. I a	am familiar with and account the	obligations of Section 607.0505, Fl	orida Statutes.	4	- ppolitiment as registered
SIGNATURE	X/Y/	JOHN 1	HOWARD E. K	111 2-23-9	78
12.		red agont and title it applicable. (NOT S AND DIRECTORS	E: Registered Agent signature red		ND DIDECTORS IN 40
TITLE	SD	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	KIDDER, BETTY		1.2 NAME		Change Radiiion
STREET ADDRESS	1170 SUGAR SANDS BLY	VD	1.3 STREET ADDRESS		8
CITY-ST-ZIP	RIVERA BCH, FL 00000		1.4 CITY-ST-ZIP	·	ļ.
TITLE	PD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	HILL, HOWARD		2.2 NAME		· -
STREET ADDRESS	1324 S MAIN ST		2.3 STREET ADORESS		
CITY-ST-ZIP	BELLE GLADE FL		2.4 CITY+ST-ZIP		
TITLE	DV	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	HILL, WILLIAM		3.2 NAME		
STREET ADDRESS	331 SE AVE H		3.3 STREET ADDRESS		
CITY-ST-ZIP	BELLE GLADE, FL 00000		3.4. CITY-ST-ZIP		
TITLE	VD	LI DELETE	4.1 TITLE		Change Addition
NAME	HILL, MAVIS		4. 2 NAME		
STREET ADDRESS	331 S.E. AVENUE H		4.3 STREET ADDRESS		
CITY-ST-ZIP	<b>BE</b> LLE GLADE FL		4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TIFLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME CORET ADDRESS			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP		od with the filing does not qualify to	6.4 CITY-ST-ZIP		ı

iling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information is report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an rustee expowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in with an action of the same appears in with an action of the same appears. indicated on this annual reofficer or director of the Block 12 or Block 13/1 o

1/22/00