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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 493506

3506

(0)

TIMELY INVESTMENTS, INC.

Principal Place of Business Mailing Address
P.O. BOX 5017
LARGO FL 34649
LARGO FL 34649

FILED Feb 13 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/31/1975 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 59-1645377 Not Applicable Suite, Apt. #, etc. Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible 24 25 Yes □ No 29 Personal Property Tax due June 30. 30 g, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 TUBOLINO, ANTHONY 5147 MARINE PARKWAY, SUITE C 82 Street Address (P.O. Box Number is Not Acceptable) **NEW PORT RICHEY FL 34652** 83 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registored Agent signature required when re-instaling) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CR2E034 (10/97 13. 1.1 TITLE TITLE S DELETE Change Addition NAME TUBOLINO, ANTHONY 1.2 NAME STREET ADDRESS 5147 MARINE PARKWAY, SUITE C 1.3 STREET ADDRESS CITY-ST-ZIP **NEW PORT RICHEY FL** 1.4 CITY - ST - ZIP DELETE Change Addition 2.1 TITLE NAME DIPPEL, MARGOT 2.2 NAME **5147 MARINE PARKWAY, SUITE C** STREET ADDRESS 2 3 STREET ADDRESS **NEW PORT RICHEY FL** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE **BEAUREGUARD, TERESA** NAME 3.2 NAME **5147 MARINE PARKWAY, SUITE C** STREET ADDRESS 3.3 STREET ADDRESS NEW PORT RICHEY FL CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE 4.1 TITLE Change Addition TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIF DELETE Change Addition TITLE 51 TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-S1-ZIP 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

anthony Tubolina

2-9-98 813-843.0064