## 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

DOCUMENT # 1. Corporation Name

517556

(7)

## **FILED** May 19 1998 8:00am Secretary of State

| PIPER                          | ACCEPTA               | ANCE CORPO                | RATION             |                            |                 |        |                |                                  |  |                  |          |                   |           |
|--------------------------------|-----------------------|---------------------------|--------------------|----------------------------|-----------------|--------|----------------|----------------------------------|--|------------------|----------|-------------------|-----------|
| Principal Plac                 | e of Busines          | SS                        | Ma                 | ailing Address             |                 |        | ···            |                                  |  |                  |          | H (1811 199)      |           |
| 2926 PIPER I                   | DRIVE                 |                           | 2                  | 2926 PIPER DRIVE           |                 |        |                |                                  |  |                  |          |                   |           |
| VERO BEACH FL 32960-1328       |                       |                           |                    | VERO BEACH FL 32960-1328   |                 |        |                |                                  | DO NOT WRITE IN YOUR SOLOE   |                  |          |                   |           |
|                                |                       |                           |                    |                            |                 |        |                |                                  | DO NOT WRITE IN TH  3. Date Incorporated or Qualified                                      | IIS SPACE        | <u> </u> |                   | $\neg$    |
|                                |                       |                           |                    |                            |                 |        |                |                                  |  |                  |          |                   | - 1       |
| 2. Principal Place of Business |                       |                           |                    | 2a. Mailing Address        |                 |        |                |                                  | 11/01/1976<br>4. FEI Number  |                  | T        | plied For         | $\dashv$  |
| 21                             |                       |                           |                    | 26                         |                 |        |                |                                  | 59-1713972   | Not Applicable   |          |                   |           |
| Suite, Apt. #, etc.            |                       |                           |                    | Suite, Apt. #, etc.        |                 |        |                |                                  |  | SS 75 Additional |          |                   |           |
| 22                             |                       |                           | 27                 | 27                         |                 |        |                | 5. Certificate of Status Desired |  | ee Re            |          |                   |           |
| City & State                   |                       |                           |                    | City & State               |                 |        |                | 6. Election Campaign Financing   | \$   | 5.00             | May Be   | 7                 |           |
| 23                             |                       |                           | 28                 | .4                         |                 |        |                |                                  | Trust Fund Contribution  |                  |          | o Fees            |           |
| Zip                            | Country               |                           |                    | Zip Cour                   |                 |        |                |                                  | 8. This corporation owes or has paid the current year Int                                  |                  |          | _ ~               |           |
| 24                             | 25                    |                           |                    | 29 30                      |                 |        |                |                                  | Personal Property Tax due June 30,   | Yes              |          | ] No              | _         |
| g, Name and Address of Current |                       |                           |                    | egistered Agent            |                 |        | Naman          |                                  | 10. Name and Address of New Register   | ed Agent         |          |                   | $\dashv$  |
|                                | aldwell, 1            |                           |                    |                            |                 | 81     | Name           |                                  |  |                  |          |                   | -         |
|                                | 8 BEACHL              |                           |                    |                            |                 | 82     | Street A       | ddres                            | s (P.O. Box Number is Not Acceptable)  |                  |          |                   | 7         |
| VE.                            | RO BEACH              | 1 FL 32963                |                    |                            |                 | 83     |                |                                  |  |                  |          |                   | 4         |
|                                |                       |                           |                    |                            |                 | 03     |                |                                  |  |                  |          |                   |           |
|                                |                       |                           |                    |                            |                 | 84     | City           |                                  | -  | EL 85            | Zip C    | Code              | 7         |
| 44 Pursuant                    | to the provis         | sione of Sactions of      | 7 DL02 and 6       | 07 1509 Florida Sta        | tutos the a     | hove   | namod          | corpor                           |  |                  | aina ita | rogistoros        | ,         |
| office or r                    | registered ag         | gent, or both, in the     | State of Floric    | ta Such ch <b>ange w</b> a | is authorize    | d by   | the corp       | oration                          | ation submits this statement for the purpos<br>n's board of directors. I hereby accept the | appointme        | ant as i | registered        | <b>'</b>  |
| agent. La                      | ım <b>fam</b> iliar w | ith, and accept the       | obligations of     | , Section 607,0505,        | Florida Sta     | tutes  | i.             |                                  |  |                  |          |                   |           |
| SIGNATURE                      | Stonature Ivoed       | 16/ profed name of regist | and agent and les- | if applicable (N           | NOTE: Registere | d Ago  | Id Signature I | reourred                         | when reinstating) DAT  | F .              |          |                   | ۔ ا       |
| 12.                            |                       |                           | RS AND DIREC       |                            | 13.             |        | <u> </u>       |                                  | ADDITIONS/CHANGES TO OFFICERS  |                  | CTOR     | S IN 12           | Է         |
| TITLE                          | DP                    |                           |                    | DELETE                     | 1.1 T)          | TLE    |                |                                  |  | Ci               |          | Addition          | n (       |
| NAME                           | SUMA, CHARLES M.      |                           |                    | 1.21                       |                 |        | 1.2 NAME       |                                  |  |                  |          |                   |           |
| STREET ADDRESS                 | 2926 P                | iper drive                |                    |                            | 1.3 S           | rreft  | ADDRESS        |                                  |  |                  |          |                   | }         |
| CITY-ST-ZIP                    | VERO E                | BEACH FL                  |                    |                            | 1.4 C           | TY-S   | Y-ZIP          |                                  |  |                  |          |                   | 18        |
| TITLE                          | DS                    |                           |                    | ☐ DELETE                   | 2.1 10          | TLF    |                |                                  |  | ☐ C              | ange     | Addition          | n ] (     |
| NAME                           |                       | eb, werner                |                    |                            | 2.2 N           | AME    |                |                                  |  |                  |          |                   |           |
| STREET ADDRESS                 |                       | iper drive                |                    |                            | 2.3 \$          | rree1  | ADDRESS        |                                  |  |                  |          |                   |           |
| CITY-ST-ZIP                    | <del></del>           | BEACH FL                  |                    |                            | 2.40            | ITY-S  | T-2(P          |                                  |  |                  |          |                   |           |
| TITLE                          | DT                    |                           |                    | ☐ DELETE                   | 3.1 1           | TLE    | J              |                                  |  | Ct               | ange     | Addition          | n ]       |
| NAME                           |                       | N, PAUL A                 |                    |                            | 3.2 N           | ΜÉ     |                |                                  |  |                  |          |                   |           |
| STREET ADDRESS                 |                       | IPER DRIVE                |                    |                            | 3.3 \$          | REET   | ADDRESS        |                                  |  |                  |          |                   |           |
| CITY-ST-ZIP                    | VERO E                | BEACH FL                  |                    |                            |                 |        | T-ZIP          |                                  |  |                  |          |                   | _         |
| TITLE                          |                       |                           |                    | ☐ DELETE                   | 4 1 T1          |        |                |                                  |  | ∐ CI             | ange     | Addition          | n         |
| NAME                           |                       |                           |                    |                            | 4 2 N           |        | ŀ              |                                  |  |                  |          |                   |           |
| STREET ADDRESS                 |                       |                           |                    |                            | 4.3 S           | REET   | ADDRESS        |                                  |  |                  |          |                   |           |
| CITY-ST-ZIP                    |                       |                           |                    |                            |                 | 1Y - S | T - Z∤P        |                                  |  |                  |          | 1 1 1 2 2 2       | _         |
| TITLE                          |                       |                           |                    | ☐ DELETE                   | 5.1 TJ          |        |                |                                  |  | ☐ Cr             | ange     | Addition Addition | n         |
| NAME                           |                       |                           |                    |                            | 5.2 N           |        |                |                                  |  |                  |          |                   |           |
| STREET ADDRESS                 |                       |                           |                    |                            |                 |        | ADDRESS        |                                  |  |                  |          |                   |           |
| CITY-ST-ZIP                    |                       |                           | ···                | DELETE                     |                 | TY-\$1 | I - 2IP        |                                  |  | Cr               | 2000     | Addition          | $\exists$ |
| TITLE                          |                       |                           |                    | ריין הברבוב                | 6.1 TI          |        |                |                                  |  | ᆫ                | anyd     | AQUAIDI           | 1         |
| NAME                           |                       |                           |                    |                            | 6.2 N           |        | 1000000        |                                  |  |                  |          |                   | 1         |
| STREET ADDRESS                 |                       |                           |                    |                            |                 |        | ADDRESS        |                                  |  |                  |          |                   |           |
| 14. I hereby o                 | certify that th       | e information supp        | lied with this fi  | ling does not qualify      |                 | TY-ST  |                | d in Se                          | ection 119 07(3)(i). Florida Statutes, I furthe  | r certify th     | at the   | information       | -         |

receive using macro mormation supplied with this limits does not quality for the exemption stated in Section 119,07(3)(i). Florida Statutes. I further certify that the informatic 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.