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)

FILED Jan 16 1998 8:00am Secretary of State

SOROT	A & ZSCHAU, P.A.			T (ADIA) DIVI (BDI) AFRICA (BDI) AVAILA (BD) DIVI DIVI DIVI DIVI DIVI DIVI DIVI DI	: Aid Bidah Aibh Aibh Bidh Ibb
Principal Plac	e of Business	Mailing Address			IEIK ALAIK SIAN AISIN BIBIN KABI
28100 U.S. HIGHWAY 19 NORTH		28100 U.S. HIGHWAY 1	9 NORTH		
STE, 504 CLEARWATER FL 34621		STE. 504 Clearwater Fl. 34621		DO NOT WRITE IN TH	IS SPACE
US		US		3. Date Incorporated or Qualified	
				06/28/1978	
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-1829104	Not Applicable
Suite, Apt.	#, ⊖IC.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zτρ	Country	8. This corporation owes or has paid the o	
24	25	29	30	Personal Property Tax due June 30. 10. Name and Address of New Registere	Yes No
	ROTA, JR. J 100 U.S. HIGHWAY 19 NORTH				
	E. 504		82 Street A	ddress (P.O. Box Number is Not Acceptable)	
	EARWATER FL 34821		83		
			84 City		85 Zip Code
				F	
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.					
agent. I a	m familiar with, and accept the obliga	ations of, Section 607.0505, F	Iorida Statutes.	,	
SIGNATURE	Signature, typed or printed name of registered age	or and title diagonicable (NC)	TL: Registered Agent signature re	outrod when reinstating) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
THLE	PD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	ZSCHAU, JULIUS J.		1.2 NAME		
STREET ADDRESS	1910 SADDLE HILL RD N		1.3 STREET ADDRESS		•
CITY-ST-ZIP	DUNEDIN FL	DELETE	1.4 C/TY - S1 - Z/P		Change Addition
TITLE	STD CORDIA I ID	ר ווירוני	2.1 1111.6		Change Addition
NAME STREET ADDRESS	SOROTA, JOSEPH J. JR. 2201 PADDOCK CIRCLE		2.2 NAME 2.3 STRELT ADDRESS		
CITY-ST-ZIP	DUNEDIN FL		2. 4 CITY - ST - ZIP		i
1111.8	DOTTED IT TO	DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - ST - ZIP			3 4. CITY - S1 - ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP	<u> </u>	T NOTE	4.4 CITY - ST - ZIP		Channe D Million
TITLE		[] DELETE	5.1 TITLE		Change Addition
NAME OTREET ADDRESS			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
NAME	•		6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 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 supplicated and indicated on this annual report is frue 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 find 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 Ahanged or or an altacty for the with an address.

812-791-1557