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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

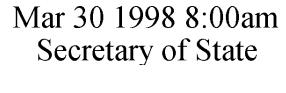
Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(3)

CHAMBERS, SALZMAN & BANNON, P.A.



FILED

СНАМ	BERS, BANNON, CHAM	BERS & CHAMBEI	RS, P.A	2-1-97
Principal Plac	e of Business	T ARBITE BINNY BRINN BIRTH NARMY BAELD BANT ENERT BARKI BARKI BARKI BARKI BIRKI BARKI BIRKI BARKI BIRKI BARKI		
520 4TH ST N POB 1191 520 4TH ST N POB 1191				
ST PETERSBURG FL 33701 ST PETERSBURG FL 33701				DO NOT WOITE WITHOUT OF
			DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified
2. Principal P	face of Business	2a, Mailing Address		03/27/1973 4. FEI Number Applied For
21		26		59-1454535 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				¢0 75 Addis
27				5. Certificate of Status Desired Fee Required
City & State	e	City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	[25]	29	30	Personal Property Tax due June 30. 🔀 Yes 🗌 No
	g. Name and Address of Curren	r negisteresi Agent	81 Name	10. Name and Address of New Registered Agent
Unampers, Jusern n				
52Q 4TH ST N			82 Stree	et Address (P.O. Box Number is Not Acceptable)
ST PETERSBURG FL 33701			83	
•				
			84 City	FL 85 Zip Code
11, Pursuant	to the provisions of Sections 607.050.	2 and 607.1508, Florida Statute	es, the above-name	ed 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	Signature, lyped or printed name of registered age	of and title if applicable (NOTE	Registered Agent signatu	ture required when reinstating) DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	□ DELETE	1.1 TITLE	Change 🔀 Addition
NAME	CHAMBERS, JOSEPH H		12 NAME	
STREET ADDRESS	520 4TH ST N		1.3 STREET ADDRESS	S
CITY-ST-ZIP	ST PETERSBURG, FL 00000	Dr. cre	1.4 CITY-ST-ZIP	3370
TITLE	\$0	☐ DELETE	2.1 TITLE	S (NOT S/D) Change Addition
NAME	MASTRY, R. DONALD		2.2 NAME	
STREET ADDRESS	360 CENTRAL AVE. \$T. PETERSBURG FL		2.3 STREET ADDRESS	S
CITY-ST-ZIP	D D	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE	☐ Change ☐ Addition
NAME	SALZMAN, BARRY M	<u> </u>	3.2 NAME	Oliange E Addition
STREET ADDRESS	520 4TH ST N		3.3 STREET ADDRESS	c
CITY-ST-ZIP	ST PETERSBURG FL			»
TITLE	D	DELETE	3.4. CITY-ST-ZIP	☐ Change X Addition
NAME	BANNON, RICK G	<u></u>	4. 2 NAME	outline
STREET ADDRESS	520 4TH ST N		4.3 STREET ADDRESS	s
CITY-ST-ZIP	ST PETERSBURG FL		4.4 CITY-ST-ZIP	33701
TITLE	D	DELE te	5.1 TITLE	☐ Change
NAME	CHAMBERS, JOSEPH W		5.2 NAME	D€
STREET ADDRESS	520 4TH ST N		5.3 STREET ADDRESS	S L4 15
CITY-ST-ZIP	ST PETERSBURG FL		5.4 CITY-ST-ZIP	3 -9 33701
TITLE	D	DELE TE	6.1 TITLE	☐ Change ★ Addition
NAME	CHAMBERS, JEFFREY K		6.2 NAME	000002472820
STREET ADDRESS	520 4TH ST N		6.3 STREET ADDRESS	
CITY-ST-ZIP	ST PETERSBURG FL		6.4 CITY - ST - ZIP	***150.00 3370
CITY-ST-ZIP ST PETERSBURG FL 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 8				
officer or director of the comparation or the receipt of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or block 13 or on an attack with an address.				
Block 12 or Block 13 manageria, or on an artigraphysent with any address.				