FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

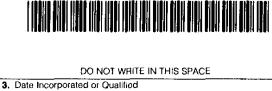
Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name 613188

PMD, INCORPORATED

FILED Jan 16 1998 8:00am Secretary of State



Principal Place of Business	Mailing Address		T SBOTTE BITCH TISON THAN THAN THAN THAN	II FOLO BYDOL BLOIL BLOIL BIDGE BLOKE BIDKI HADI	
438 S. NIEMAN AVE. 436 S. NIEMAN AVE. MELBOURNE FL 32901 MELBOURNE FL 32901			DO NOT WR	ITE IN THIS SPACE	
			3. Date Incorporated or Qualifie	d	
2. Principal Place of Business	2a. Mailing Address		03/16/1979 4. FEI Number	Applied For	
21	26 POBOX	रव	59-1892638	Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	<u> </u>		SR 75 Additional	
22 27			5. Certificate of Status Desired	Fee Required	
City & State	City & State	2.5 61	6. Election Campaign Financing	\$5.00 May Be	
23	28 MEL 600	RNE, FL	Trust Fund Contribution	Added to Fees	
Zip Cour	7ip 29 32902	Country	8. This corporation owes or has		
24 25 9 Name and Add	Iress of Current Registered Agent	30 0	Personal Property Tax due Ju 10. Name and Address of New		
BALALOCK, HELEN 81 Name					
ARRA BAY BIND AIR					
PALM BAY FL 32905		82 Str	eet Address (P.O. Box Number is Not Accep-	table)	
]		83			
		B4 Cit	W	85 Zip Code	
				FL	
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					
	ome of registered agent and title if applicable (for OFFICERS AND DIRECTORS		nature required when reinstating)	DATE	
12.	DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12 Change Addition	
NAME BLALOCK, JAC	- -	1.2 NAME	;		
STREET ADDRESS 106 S OSCEOL		1,3 STREET ADDRI	S POZO BAY RIND A) <i>F</i>	
CITY-ST-ZIP INDIAN HRB BC		1.4 CITY-ST-ZIP	PAIN RAY EL	37.605	
TITLE ST	DELETE	2.1 TITLE	1715-717-7	Change Addition	
NAME BLALOCK, JAC	KE	2.2 NAME		a '	
STREET ADDRESS 106 S OSCEOL	A AVE	2.3 STREET ADDRI	ESS EGZO BAY BLVD N PALM BAY, FL SS 2920 BAY BLVD N PALM BAY, FL 32		
CITY-ST-ZIP INDIAN HRD BC	H FL	2 4 CHY-ST-ZIP	PALM BAY, FL 32	.905	
TITLE	☐ DELETE	3 1 TITLE		Change Addition	
NAME		3.2 NAME			
STREET ADDRESS		3.3 STREET ADDRE	ess	1	
CITY-ST-ZIP	F-1 2	3.4. CITY - \$7 - 2IP			
TITLE	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition	
NAME		4. 2 NAME			
STREET ADDRESS		4.3 STREET ADDRI	ESS		
CAY-ST-ZIP	DELETE	4.4 City-ST-ZiP		Change Addition	
TITLE	C) Deceie	5.1 TITLE		C change C Audition	
NAME STREET ADDRESS		5.2 NAME 5.3 STREET ADDRE	-cc	,	
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CITY-ST-ZIP TITLE	DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition	
NAME	- Sattle	6.2 NAME		_ orming _ radiust	
STREET ADDRESS		6 3 STREET ADDRE	ss		
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 of 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 for the receiver or this processor in the corporation of the corporation for the receiver or the corporation for the receiver of the receiver of the corporation for the receiver of the corporation for the receiver of the receiver