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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Apr 03 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

	MENT # F1475 IKI DEVELOPMENTS, INC.	2 (2)				91. 8784 8184 8184 8444 841
Principal Place of Business Mailing Address					I AUDITER ITEL ITELL BIDIT FOURT OFFI DIFFE FIBL BIDIT OF	011 01011 01011 91011 91011 1091
C/O JOHN T. BERTEAU 200 S. ORANGE AVE. SARASOTA FL 34236 US		C/O JOHN T. BERTEAU 200 S. ORANGE AVE. SARASOTA FL 34238 US		DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified		
00		00			01/13/1981	
2. Principal P	Place of Business	28. Mailing Address			4. FEI Number	Applied For
21		26			59-2168577	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		City & State			Fee Required	
City & State		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country		8. This corporation has paid the co	
24	25	29	30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre				10. Name and Address of New Registere	
BE	RTEAU, JOHN T		81	Name		
200 S. ORANGE AVE.			82 Street Add		dress (P.O. Box Number is Not Acceptable)	
SARASOTA FL 34236			_			
			83	İ		
j			84	City		85 Zip Code
44 Durament	to the provisions of Captions 607.05	00 and 607 1500. Florido Clatu	too the obe		rporation submits this statement for the purpose	
agent. I a	im familiar with, and accept the oblig	gations of, Section 607.0505, FI	orida Statute IE: Registered Age	s	ation's board of directors. I hereby accept the ap	
12.	PD OFFICERS AN	ND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AT	
TITLE NAME	ALLENSEN, WILLIAM	☐ DETEIR	1.1 TITLE			L. Change L. Addition
STREET ADDRESS	351 ASCOT PLACE		1.2 NAME 1.3 STREET	ADDRICE		
CITY-ST-ZIP	WATERLOO,ONTARIO,CA		1.4 CITY - 9	1		
THLE	↑ DELETE		2.1 TiTLE	11-217		Change Addition
NAME	BELL, DOROTHY H		2.2 NAME			
STREET ADDRESS	8 CRESCENT ST		2.3 STREET	ADDRESS		
CITY-ST-ZIP	KITCHENER, ONTARIO, CA		2.4 CITY-	ST-ZIP		
TITLE	\$	DELETE				Change Addition
NAME	allensen, sandra c		3.2 NAME			
STREET ADDRESS	351 ASCOT PLACE		3.3 STREET	ADDRESS		
CITY-ST-ZIP	WATERLOO,ONTARIO,CA	T REFER	3.4. CITY-	ST - 71P		
TITLE		☐ DELETE	4.1 TITLE	}		Change Addition
NAME			4. 2 NAME	1000000		
STREET ADDRESS			4.3 STREET			ţ
CITY+ST-ZIP TITLE	DELETE		4.4 CITY - S 5.1 TITLE	1-414		Change Addition
NAME) otter		5.2 NAME	1		
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY - ST - ZIP			5.4 CITY - S			}
TITLE	DELETE		6.1 TITLE			Change Addition
NAME			6.2 NAME	1		
STREET ADDRESS			6.3 STREET	ADDRESS		
CITY+ST-7/P			64 CHY-S	:T-71P		

14. I hereby 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:

Willia allum

"WILLIAM ALLEWSEN PARS MAPIL 1998 519-747-2883