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

OCUMENT # F14902

(3)

EDEN INVESTMENTS, INC.

FILED Apr 08 1998 8:00am Secretary of State

CDE14 H	MYLOTMENTO, INC.						
Principal Place	e of Business	Mailing Address					
1406 BERSHIE	RE DRIVE (BRANDON)	1406 BERSHIRE DRIVE	1406 BERSHIRE DRIVE (BRANDON)				
P.O. BOX 320549		P.O. BOX 320549	P.O. BOX 320549				
TAMPA FL 33	679	TAMPA FL 33679				DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified 01/15/1981	
9 Principal Pi	lace of Business	2a, Mailing Address				4, FEI Number Applied For	
 						NOT APPLICABLE Not Applicable	
	#. etc.	Suite, Apt. #, etc.				CR 75 Additional	
_		27				5. Certificate of Status Desired Fee Required	
City & State		City & State				6. Election Campaign Financing \$5.00 May Be	
23		28				Trust Fund Contribution Added to Fees	
Z ip	Country	Ζφ	Cour	ntry		This corporation owes or has paid the current year Intangible	
24	25	29	30			Personal Property Tax due June 30. Yes No	
	· · · · · · · · · · · · · · · · · · ·	nt Registered Agent		B1 1	Name	10. Name and Address of New Registered Agent	
				ا''	Name		
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 25 9. Name and Address of Curren COVINGTON, DECARR D., JR. 1408 BERKSHIRE DRIVE BRANDON FL 33511 11. Pursuant to the provisions of Sections 607 050: office or registered agont, or both, in the State agent. I am familiar with, and accept the oblige SIGNATURE Signature, typed or printed name of registered agent.			62	Street Addr	iress (P.O. Box Number is Not Acceptable)		
BR	ANDON FL 33511		-	83			
				03			
1				84	City	FL 85 Zip Code	
dd Diversant	to the provisions of Sections 607.05	02 and 607 1508. Florida Statu	ites the ab	YOVE.	named corn		
office or r	egistered agent, or both, in the State	e of Florida Such change was	authorized	by '	the corporati	ation's board of directors. I hereby accept the appointment as registered	
agent. I a	m familiar with, and accept the oblig	gations of, Section 607.0505, F	iorida Stati	utes.			
SIGNATURE	Simpalure, broad or printed name of zerostered as	pent and title it applicable (NO	TE: Registered	Agen	I signature require	uired when reinstating) DATE	
<u> </u>		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
	P	☐ DEL€ TE	1,1 TIT	LE		Change Addition	
NAME	COVINGTON, DECARR D. J.	₹	1.2 NA	ME			
STREET ADDRESS			1.3 STI	REET A	NODRESS		
CITY-ST-ZIP			1.4 CIT	Y-ST	-ZIP		
TITLE		DELETE	2.1 111	LĒ	İ	☐ Change ☐ Addition	
NAME			2.2 NA	ME			
STREET ADDRESS			2.3 \$1	REET A	ADDRESS		
	BRANDON FL		2 4 CI		T- ZIP		
1		DELETE	3.1 111		1	Change Addition	
			3.2 NA				
STREET ADDRESS					ADDRESS		
CFTY - ST - ZIP		DELETE	3.4. CI	_	1 - ZIP	Change Addition	
TITLE		C) trent	4.1 TIT				
NAME ATOTET ADOOFED			4.2 N/		ADDRESS		
STREET ADDRESS					· •		
CITY-ST-ZIP TITLE		DELETE	4.4 CIT		-217	Change Addition	
NAME		<u> </u>	5.2 NA				
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP			5.4 CD				
TITLE		DELETE	6.1 10	_		Change Addition	
NAME			6.2 NA			·	
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP			6.4 (0)		1		
0111-01-211		at the file a stand and available				n Section 110 (17/3)(i). Florida Statutos I further certify that the information	

4. 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 informatio indicated on this annual report or supplemental annual reports is true and accurate and they my signature shall have the same legal effect as if made under oath; that I am an officer or director of the oxporation or the receiver or Justee ampowered to execute this report as required by Chapter 537. Florida Statutes; and that my name appears in Block 12 or Block 13 if thanged plon an aductment with the address.

SIGNATURE:

CR2E034 (10/9)