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 # F60126

(2)

SPEEDBALL ENTERPRISES, INC.

FILED
May 07 1998 8:00am
Secretary of State

Principal Place of Business		Mailing Address			
316 10TH AVE		316 10TH AVE			
P.O. BOX 681		P.O. BOX 681			
INDIAN ROCK BEACH FL 34635		INDIAN ROCK BEACH FL 34635			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
2. Principal Place	e of Business	2a, Mailing Address			12/29/1981 4. FEI Number Applied For
21		26			58-1471348 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			SR 75 Additional
22		27			5. Certificate of Status Desired Fee Required
City & State		City & State			B. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip Countr		ry	8. This corporation owes or has paid the current year Intangible
25 29 30 30 9. Name and Address of Current Registered Agent					Personal Property Tax due June 30. Yes No
oron	<u> </u>	uaAlstatan waant	В	1 Name	
PERRY, CHARLES			L	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	CLEVELAND ST., SUITE 900 RWATER FL 34615		В	2 Street	et Address (P.O. Box Number is Not Acceptable)
CLEA	MINIER PL 34015		8	3	
j			L		
			8	4 City	FL 85 Zip Code
11 Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-pamed 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					
	nature typed or printed name of registered age-	·	Registered A	geni signature	ure required when reinstating) DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
, , , , , , , , , , , , , , , , , , , ,	PS	☐ DELETE	1,1 TITLE		Change Addition
			1.2 NAM		.
	OLEADWAYED EL			ET ADDRESS	š }
	D CLEARMAIER FL	DELETE 2.171		ST-ZIP	Change Addition
1	JUSTICE, JAMES M., III		2.2 NAME		
	P.O. BOX 10352, NA		2.3 STREET ADDRESS		s
	CLEARWATER FL		2. 4 CITY		<i>I</i>
TITLE			3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STRE	ET ADDRESS	s
CITY-ST-ZIP			3 4. CITY	-ST-ZIP	
TITLE	☐ DELETE		4.1 TITLE		Change Addition
NAME			4 2 NAM		
STREET ADDRESS			4 3 STRE	et address	3
CITY-ST-ZIP		DELETE	4 4 CITY		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME CTOTET ADDRESS			5.2 NAME		
STREET ADDRESS	Λ			T ADDRESS	•
CITY-ST-ZIP	/ /-	☐ DELETE	5.4 CITY- 6.1 TITLE		Change Addition
NAME	//\ /1.	ן אננניני	6.2 NAME		Cultury
STREET ADDRESS	//\ //\			T ADDRESS	
CITY-ST-ZIP	// \ //\		6.4 CITY		<u> </u>
14. I hereby certi	ily that the information supplied wit	this filing does not qualify for	the exem	ption state	ated in Section 119.07(3)(i), Florida Statutes. I further certify that the information
indicated on t	unis annual Report or supplemental	ratinual report is true and accu	irate and t	nat mv sid	signature shall have the same legal effect as if made under oath; that I am an

indicated on this annual lophut or supplied with this ming does not quality for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the informatic indicated on this annual lophut or supplime that large 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 the an attact ment with an address.

SMATURE - MAGN AND

72 Ag. 198 872 596-6474