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 # F67645

(4)

BASS ASSOCIATES, INC.

FILED Feb 11 1998 8:00am Secretary of State

Principal Place of Business Mailing Address										- I IDDILOKO LILO BOLLI DODIO GALLI BIDOL DILI BADAL DIBIL DEFAL BIDAK DEDAK DEDAK PADAL	
P. O. BOX 361217 P.						O. BOX 361217 ELBOURNE FL 32836-1217					DO NOT WRITE IN THIS SPACE
											3. Date Incorporated or Qualified 02/17/1982
2, Principal P	2a.	Aailing Address				<u> </u>	4. FEI Number Applied For				
21	26							59-2161816 Not Applicable			
Sulte, Apt.	#, etc.			Suite, Apt. #, etc.							5 Certificate of Status Desired \$8.75 Additional
22				;	27						Fee Required
City & State					City & State						6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip		(Country	Zip				Country			This corporation owes or has paid the current year Intangible
24		25		l:	29 30			- 1	•		Personal Property Tax due June 30. Yes ANO
	urrent Re	ent Registered Agent						10. Name and Address of New Registered Agent			
	ISS, PAUL							81		Name	
1336 RICHMOND DR. Melbourne Fl. 32935								82	+	Street Addres	ss (P.O. Box Number is Not Acceptable)
								83	-		
								1	0.1		
							84	L	City	FL 85 Zip Code	
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, Soction 607.0505, Florida Statutes.											
SIGNATURE	Constant hand	DI OVO	lad can a d reputou	ad agout mu	et teller al	Lamboutdo	NOTE Pagin	tornd An	ont.	signature required	when roinstailing) CATE
Signature, typed or printed name of registered agrint and title if applicable (NOTE Registored A 12. OFFICERS AND DIRECTORS 13.									KA IL	aignaiore rectation	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	STD							1.1 TITLE			Change Addition
NAME					1.21				1.2 NAME		
STREET ADDRESS			30X 204 A				1	3 STREE	I AC	DORESS	
CITY-ST-ZIP	CULLO	WHE	E NC					1.4 CITY-ST-ZIP		ZIP	
TITLE	PD	A. 184	ICLBY D. ID				•	II TITLE			L_I Change L_I Addition
NAME			BY D JR					2.2 NAME			
STREET ADDRESS	CULLO		30X 204A					.3 STREET			
CITY-ST-ZIP TITLE	V	MUC	FILE IVO			DELETE		. 4 CITY- .1 TITLE			☐ Change ☐ Addition
NAME	BASS, I	RIAS						3.2 NAME			C Grange Manage
STREET AODRESS			OND DR.					3.3 STREET ADDRESS		ODRESS	
CITY-ST-ZIP	MEN DOLIDATE CL					3.4				1	
TITLE								4.1 TITLE			Change Addition
NAME						4.3			4. 2 NAME		
STREET ADDRESS							4	.3 STREET	T AC	DDRESS	
CITY-ST-ZIP	-ST-ZIP					4.4 (S1 - 2	ZIP	
TITLE	LE					DELETE 5.1			5.1 THLE		Change Addition
NAME							5	2 NAME			
STREET ADDRESS							5	.3 STREET	(AD	DDRESS	
CITY-ST-ZIP								5.4 CITY-ST-ZIP		ZIP	
TITLE								61 TITLE		}	Change Addition
NAME CTREET APPRICE								2 NAME		nnosco	
STREET ADDRESS	•							3 STREET			
14. I hereby c	ertify that the	a info	rmation supplie	ed with th	nis fili	ing does not qualif	v for the	4 CITY-S exemp	otio	on stated in Se	oction 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											