## 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

**FILED** Jan 30 1998 8:00am Secretary of State

ACS A Principal Place 2703-23RD A	SPHALT COA	Mailing	<b>\</b>				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified			
9 Principal F	Place of Business		Do Mai	ling Address				04/21/1982		
21	iace of Dusiness		2a. Mailing Address				4. FEI Number		Applied For Not Applicable	
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				SR 75 Additional			
22		27	27				5, Certificate of Status Desired		Required	
City & Stat	te	— <del>—</del>	City & State				6. Election Campaign Financing	\$5.00	0 May Be	
23		28	— - · · · · · · · · · · · · · · · · · ·				Trust Fund Contribution Added to Fees			
Zip 24	<b>├</b> ─┐	ountry	Zip		_	intry		8. This corporation owes or has paid the cu		
24	25 Name and 4	Address of Curr	29	Agent	30			Personal Property Tax due June 30.  10. Name and Address of New Registered		<b>X</b> No
				- ragoni		81 1	Name	10. Name and Address of New Registered	Agent	
FLANNERY, JOSEPH T. 2703 23RD AVE N.						82 5				
	PETERSBURG F					Street Addr	ress (P.O. Box Number is Not Acceptable)			
•		2 007 10				83				<del>*</del>
						84 (	216.			
						'		FL	_   `   `	Code
office or r agent. I a SIGNATURE	in landidar wind, and		gations of, 590	TION BU7.USUS, F	iorida Stat	utes.		poration submits this statement for the purpose of tion's board of directors. I hereby accept the ap	or changing pointment a	its registered s registered
12.	Signature, typed or printe	<del></del>	gent and little if appli ND DIRECTOR	<del> </del>		Agent s	ignature requir	red when reinstating) DATE		
TITLE	P	OFFICERS A	NO DINECTOR	DELETE	13.	11.6		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO Change	RS IN 12
NAME	FLANNERY, J	OSEPH T.			1.2 NA				спанус	L.J. ROUIIION
STREET ADDRESS	2703 23RD A				·	reet adi	DRESS			
CITY-ST-ZIP		JRG, FL 00000	•			TY-ST-Z	1			
TITLE				DELETÉ	2.1 TIT				Change	Addition
NAME					2.2 NA	ME	ĺ			
STREET ADDRESS					2.3 ST	REET ADI	DRESS			
CITY-ST-ZIP		<del></del>				TY-ST-2	ZIP .			
TITLE				☐ DELETE	3.1 TIT				Change	Addition
NAME DECET ADDRESS					3.2 NA					
STREET ADDRESS						REET ADD				
CITY-ST-ZIP TITLE	<del>14</del>			DELETE	3.4. CF 4 1 THT	TY-ST-Z	TP		Change	Addition.
NAME				D print	4 / III				□ ∩igii@e	☐ Addition
STREET ADDRESS						reet ado	DRESS			
CITY-ST-ZIP					1	Y - ST - ZI				
TITLE	<u> </u>			DELETE	5.1 7(1)				Change	☐ Addition
NAME					5.2 NA	ME.			. •	
STREET ADDRESS					5.3 STF	REET ADD	RESS			
CITY - ST - ZIP					5.4 CIT	Y-ST-ZI	P			
TITLE				☐ DELETE	6.1 TiTL	LE			Change	Addition
NAME					6.2 NAM	ME				
STREET ADDRESS					6.3 STR	REET ADO	ress			ĺ
CITY-ST-ZIP	artiful that the lines	action over the t	cials at the areas of	196 5	6.4 CIT	Y-ST-ZI	Р 1			
14. I hereby c	ertify that the inforr	nation supplied v	vith this filing d	oes not qualify for	or the exer	mption	stated in S	Section 119.07(3)(i), Florida Statules. I further ce	rtify 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,