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 # F78450

A & R STAMP & COIN, INC.

(6)

FILED Apr 23 1998 8:00am Secretary of State



						IBII BIBII BIBII BIBII BIBII IBBI
Principal Place of Business Mailing Address						
1518 W. VINE		1516 W. VINE ST				
PO BOX 420730		PO BOX 420730		DO NOT INDITE IN THIS SDACE		
KISSIMMEE FL 34742-7730 US		KISSIMMEE FL 34742-7730 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
					04/30/1982	
2. Principal Pl	ace of Business	2a. Mailing Address			4, FEI Number	Applied For
21		26			59-2191713	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				\$8.75 Additional
22		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
Zip Country		Zip Country		ry	8. This corporation owes or has paid the	
24	25	29	30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Register	ed Agent
	EDER, EARL T.		16	1 Name		
1106 LEHIGH STREET			le le	2 Street Add	dress (P.O. Box Number is Not Acceptable)	
KISSIMMEE FL 34744						
			8	3		
			18	4 City		85 Zip Code
			1		•	L
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, Section 607.0505, Florida Statutes.						
SIGNATURE						
	Signature, typed or printed name of registered agen			gent signature req	uired when reinstating) DAT	
12.	PD OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS A	Change Addition
TITLE	REEDER, EARL T.	APA PARI Y				
NAME	1108 LEHIGH ST.	1.2 N				
STREET ADDRESS	MOONINEE EI			ET ADDRESS		
CITY-ST-ZIP	D	DELETE	1.4 CITY			Change Addition
TITLE	DECDED HIANITA I		2.1 TITLE			C Allende T Vocation
NAME	9035 WELLS WAY		2.2 NAM	l		
STREET ADDRESS	SAN ANTONIO TX		2.3 STREET ADDRESS 2. 4 CITY- ST-ZIP		•	
CITY-ST-ZIP	le: 1		2. 4 CHY 3.1 TITLE			☐ Change ☐ Addition
TITLE	NOTO DOCALIND			i		☐ cisalige ☐ Addition
NAME	2365 W LYNDELL DRIVE		3.2 NAM	1		
STREET ADDRESS	WOODALIEE EL			ET ADDRESS		
CITY-ST-ZIP			3.4. CITV	'-ST-ZIP		Change Addition
TITLE NAMÉ	PETTIO PARILY AND		4.1 101L			=1 outrigo Li vonition
1	BASE LAVE ANDEDOON AVE					
STREET ADDRESS	ADLANDO EL			ET ADDRESS		
CITY-ST-ZIP	- Character - Char	DELETE	5.1 T(TL)	- ST- ZIP		Change Addition
TITLE		(DECENT				- compo - nontion
NAME			5.2 NAM			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP	DELETE		5.4 City-St-ZIP			Change Addition
TITLE						Change Addition
NAME			6.2 NAM			
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP	autiliar that the information over find and	t tale filips does not a U		-ST-ZIP	in Continu 110 07/2/(i) Florida Clatutan I furtha	r portify that the information

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 of the receiver or hystec empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed out on an attachment with an address.

TAD T POTIED Shipe (107) 9223722