FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

	1998 DIVISION OF COR				PORATIONS			Secretary of State				
1. Corporation		93000001	412 (6)									
AAAA	Forwarding, I	NC.										
!												
Principal Plac	e of Business	Mailin	ng Address		_			1 	i aanii kalii di	HIST TITOL BLOOK	11018 1101 1081	
8300 ULMERTON ROAD 8300 ULMERTON ROAD												
SUITE 112 LARGO FL 3	2771		SUITE 112 LARGO FL 33771					DO NOT WRITE IN THIS SPACE				
US US	0//1	US					ŀ	3. Date Incorporated or Qualifie			<u></u>	٦
								03/23/1993				
	lace of Business		lailing Address				-	4. FEI Number			Applied For	4
Suite, Apt.	#. etc.	26	uite, Apt. #, etc.					38-2737638			Vot Applicable Additional	븻
22		27					}	5. Certificate of Status Desired			Required	
City & Stat	е	 	ity & State					6. Election Campaign Financing			May Be	7
Z ip	Cour	itry Z	in .		intry			Trust Fund Contribution			to Fees	-
24	25	29	,	30	ıı ıtı y		1	 This corporation owes or has Personal Property Tax due Ju 			ntangible No	-
	1=01	ress of Current Register	ed Agent					10. Name and Address of New				_
CL	IMMINGS, DEAN C				81	Name						
	80 ULMERTON ROA	AD #304			82	Street	Addres	s (P.O. Box Number is Not Accep	table)			7
LA	RGO FL 34641				83							\dashv
												╛
					84	City			FI	85 Zip	Code	7
11. Pursuant	to the provisions of Se	ections 607.0502 and 607.	1508, Florida Statute	s, the al	DOVE	e-named	l corpor	ation submits this statement for th	e purpose	of changing	its registered	1
office or r agent. I a	egistered agent, or bo m familiar with, and a	oth, in the State of Florida. Ocept the obligations of, S	Such change was a ection 607.0505, Fio	utnorize rida Stat	a by utes	the cor	poration	ation submits this statement for the statement of the statement of directors. I hereby according to the statement of the stat	cept the ap	pointment a	s registerea	-
SIGNATURE			-· <u></u>									1
12,	Signature, typed or printed na	me of registered agent and title if an OFFICERS AND DIRECTO		Registered	Age	nt signatur	e required	when reinstating) ADDITIONS/CHANGES TO OF	DATE EICERS AN	ID DIRECTO	NPS (N) 12	-16
TITLE	CP	OLITOCHO TARE BINCOTO	DELETE	1.1 TI	TLE		M	ADDITIONS/OFFANGES TO OF	IOLI IO AL	Change		10/01/
NAME	CUMMINGS, DE	AN C		1.2 N	ME		ERI	KA E. KUGER				
Street Address	8380 ULMERTO			1.3 ST	REET	address .	5012	-OXFORD AU. N.				R2F034
CITY-ST-ZIP	LARGO FL 3464	<u>1</u>		1.4 CI		r-zip	<u>37. F</u>	Etersburg, FL 33	710	1 1 01	1 A 14/10	
TITLE	winton, kecia		DELETE	2.1 TF						L Change	Addition	_
NAME STREET ADDRESS	1737 SHERWOO	AT DD ST			_	ADDRESS	1					1
CITY-ST-ZIP	CLEARWATER P			2. 4 C					<u>.</u>			
TITLE			DELETÉ	3.1 717						Change	Addition	7
NAME				3.2 NA								
STREET ADDRESS				1		ADDRESS						
CITY-ST-ZIP TITLE			DELETE	3.4. CI 4.1 TU		T-ZIP				Change	L Addition	-
NAME				4.1 M								
STREET ADORESS						ADDRESS	1					
CITY-ST-ZIP				4.4 Cm			L					
TITLE			DELETE	5.1 TIT	LE					Change	Addition	
NAME				5.2 NA			[
STREET ADDRESS 1				■ 5.3 ST	REET A	ADORESS	I					- 1

64 CITY-ST-ZIP

14. 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 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 attackment with an address.

5.4 CITY - ST- ZIP

6.3 STREET ADDRESS

6.1 TITLE 6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

INATURE AND TYPED OR PRINTED NAME OF SUCH OF PIPE SEPT (

DELETE

n 19, 985

FILED

Feb 09 1998 8:00am

050 47 0 8 Daytime Phone # 040314

Change Addition