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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 21 1998 8:00am

Secretary of State

10. Name and Address of New Registered Agent

Street Address (P.O. Box Number is Not Acceptable)

Applied For Not Applicable

Zip Code

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name F95000001751 (5)

9. Name and Address of Current Registered Agent

CORPORATION INFORMATION SERVICES, INC.

ANCHORS UNLIMITED, INC.

1201 HAYES ST.

TALLAHASSEE FL 32301

Principal Place of Business	Mailing Address	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/11/1995		
158 DARWISH DR	158 DARWISH DRIVE			
MCDONOUGH GA 30252 US	MCDONOUGH GA 30252 US			
(**	00			
2. Principal Place of Business	2a. Mailing Address	4. FEI Number Applied For		
21	26	58-2025329 Not Applica		
Suite, Apt #, etc	Suilo, Apt. #, etc.	5. Certificate of Status Desired S8.75 Additional Fee Required		
City & State	City & State 28	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip Co. 25	ritiy 7ip Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		

11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutos, 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. Lam familiar with, and accept the obligations of, Section 607.0605, Florida Statutes.

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Name

SIGNATURE	Signature, typed or printed name of respictived agent and little	ALCOHOLD TO	Secretary description	e required when reinstating) DATE	\
12.			Registured Agant signature required when reinstating) DATE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PDC	DELETE	1.1 TITLE	X Change A	ddition
NAME	PHILLIPS, ROBERT M		1.2 NAME	PDC	
STREET ADDRESS	3502 CASA WOODS LANE		1.3 STREET ADDRESS	Phillips, Robert M	
CITY-ST-ZIP	CLARKSTON GA 30021		1.4 CITY-SI-ZIP	158 Darwish Drive	1
TITLE	VDC	DELETE	2 1 TITLF	McDonough, GA 30252 Change A	ddilion
NAME	JACKSON, JAMES T		2.2 NAME		
STREET ADDRESS	103 JONES RD.		2.3 STREET ADDRESS		
CITY-ST-ZIP	MCDONOUGH GA 30253		2.4 CITY - ST - ZIP		
TITLE		☐ DELETE	3 1 TITLE	Change A	ddition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-7)P		
TITLE		DELETE	4 1 THTLE	Change A	ddition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STHEET ADDRESS		
CITY-ST-ZIP	····		4.4 City - St - ZiP		
TATLE		DELETE	5.1 TITLE	Change [] A	ddition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		· ·	54 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 THLE	L Change L A	ddilion
NAME			6.2 NAME		
STREET ADDRESS	•		6.3 STREET ADDRESS		
CITY-ST-ZIP			6 4 CITY - S1 - 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 13 if chapted, or on an attachment with an address.

Robert M. Phillips 05/01/98 (770)914 - 2243