SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/96: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9700000951 (0)

SMETAK ENTERPRISES, INC.

## FILED Oct 01 1998 8:00am Secretary of State

|--|

Principal Plac	ce of Business	_Mailing Address	_		
1910 MISTY W	78T 9426 Son Jo	€ BRIO MISTY WAY. GOLUMBUS OH 49202 1600	4400 Barnal	与pr.	
Jacksonville, FL 32257 Jacksonville FL				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified	
2. Principal F	Place of Business	2a. Mailing Address		4 FFI Number	Applied For
21 94	26 San Jose BL.	26 9476.	Son Vosc Bl	31-1500162	Not Applicable
Suite, Apt	# elc	Suite, Apt. #, etc.		01 1000102	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
	ale /	City & State		6 Etastian Compaign Financian	
23 V COC	Ksonville, FL	28 Jackson	u He	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
7in	- Country	710	Country	8. This corporation owes or has paid the cu	
24 32	257 25 Doval	30 37 27 57	Country Duva /	Personal Property Tax due June 30.	Yes No
241 00	9. Name and Address of Currer	ni Registered Agent	301	10. Name and Address of New Registered	<del></del>
CVIC	ETAK, FRANK M		81 Name	10. Hallie alla Addissa ol Non Ragistalio	
	-			·	
	6 SAN JOSE BLVD		82 Street Add	dress (P.O. Box Number is Not Acceptable)	<del></del>
JAU	KSONVILLE FL 32257		02		
			83		
			84 City		85 Zip Code
		$\sim$ 1		FI	Liftil
11. Pursuar	nt to the provisions of sections 607,050	2 and 607 1506 lorida Statute	s, the above-named corp	oration submits this statement for the purpose of c	changing its registered
office or	registered agent, or both in the Hette am familiar with and a contrib	el Florida, Sdon change was a	outhorized by the corporal	oration submits this statement for the purpose of cition's board of directors. I hereby accept the apport	pi <b>ntme</b> nt as registered
			The Districtor,	4.2	8.98
SIGNATURE	Signature, typed openinted pame of registered age	nt and title if syntacebio (NC	TE: Registered Agent signature re		
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	PCD	DELETE	1.1 TITLE		Change Addition
NAME	SMETAK, FRANK M		1.2 NAME		
STREET ADDRESS	1810 MISTY WAY		1.3 STREET ADDRESS	44.0 B. 9426 San J.	ore blud
CITY-ST-ZIP	COLUMBUS OH		1.4 CITY-ST-ZIP	Jackson wille GI	<i>3</i> 2257
TITLE	VS	DELETE	2.1 TITLE	Joekson ville, FL	Change Addition
NAME	SMETAK, MARISA	E DELETE	2.2 NAME		•
	1810 MISTY WAY			MAL TOTAL	Blul
STREET ADDRESS	COLUMBUS OH		2.3 STREET ADDRESS	4406 San Vose	ングスッフでフ
CITY-ST-ZIP	COLUMBUS OII		2.4 CITY-ST-ZIP	4426 San Jose Focksamulle, F	<u> </u>
TITLE		L DELETE:	3.1 717LE	,	Change Addition
NAME			3.2 NAME		
STREET ADDRESS	1		3.3 STREET ADDRESS		
CITY-ST-ZIP	<b>.</b>		3.4 CITY-ST-ZIP		
TITLE		DELETE.	4.1 TITLE		Change Addition
NAME	1		4.2 NAME		-
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP	1		4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME	1	[ ] DETE IF	5.2 NAME		Last Crientige Last Addition
	1		1		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP	ļ	···	5.4 CITY-ST-ZIP		
TITLE	İ	L. J DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-7iP	1		64 CITY-ST-2/P		

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 trusted appears in Block 12 or Block 13 if changed, or on an attachment that in addition.

IGNATURE:

9-78.98

(08/0) \$00.0