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FILED
Jun 04 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F97000002334 (7)

1. Corporation Name

SELVAC ACQUISITION CORP.

Principal Place of Business

4127 NW 27TH LANE, SUITE A
GAINESVILLE FL 32606

Mailing Address

4127 NW 27TH LANE, SUITE A
GAINESVILLE FL 32606

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/02/1997

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

LEARY, KEVIN E
4127 NW 27TH LANE, SUITE A
GAINESVILLE FL 32606

10. Name and Address of New Registered Agent

81 Name

David E. Fowler

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

3204 NW 57th Terrace

83

84 City

Gainesville

FL

85

32606

11. Pursuant to the provisions of Sections 607.002 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 of registered agent or registered agent and fee, if applicable

(NOTE: Registered Agent signature required when resigning)

(DATE)

4/27/98

12. OFFICERS AND DIRECTORS

TITLE CP ☒ DELETE
NAME MEHL, THOMAS L SR
STREET ADDRESS CARRION CT #3, APT 402
CITY-ST-ZIP CONDATO PR 00907

TITLE VC ☒ DELETE
NAME BARKOWSKI, ALLAN
STREET ADDRESS ONE HORIZON RD
CITY-ST-ZIP FORT LEE NJ 07024

TITLE D ☒ DELETE
NAME ZAIAS, NARDO
STREET ADDRESS 5189 ALTON RD
CITY-ST-ZIP MIAMI BEACH FL 33140

TITLE S ☒ DELETE
NAME LEARY, LEVIN E
STREET ADDRESS 6907 SW 45TH AVE
CITY-ST-ZIP GAINESVILLE FL 32606

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/D ☐ Change ☒ Addition
1.2 NAME David E. Fowler
1.3 STREET ADDRESS 3204 NW 57th Terrace
1.4 CITY-ST-ZIP Gainesville, FL 32606

2.1 TITLE D ☐ Change ☒ Addition
2.2 NAME Jack W. Forrest
2.3 STREET ADDRESS 2350 Williams Drive
2.4 CITY-ST-ZIP Clearwater, FL 33764

3.1 TITLE S/D ☐ Change ☒ Addition
3.2 NAME Gerard P. Melia
3.3 STREET ADDRESS 19005 St. Laurvant
3.4 CITY-ST-ZIP Lutz, FL 33549

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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 attachment with an address.

CR2E034 (10/97)



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