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

PROFIT CORPORATION ANNUAL REPORT 1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(8)

ADVANCED MOBILEHOME SYSTEMS OF TAMPA, INC.

Principal Place of	Business	Mailing Address						
941 SW 8TH ST POMPANO BCH		941 SW 8TH STREET POMPANO BCH FL 33069						
2. Principal Place	of Business	2a. Mailing Address						
Suite, Apt. #, et		Suite, Apt. #, etc.						
<u> </u>	G.							
22		27						
City & State		City & State						
23		28						
Zin	Country	Zin Country						

FILED Jan 30 1998 8:00am Secretary of State



POMPANO BCH FL 33069			POMPANO BCH FL 33069				DO NOT WRITE IN THIS SPACE				
								3. Date Incorporated or Qualified			
								10/03/1983			
2.	2. Principal Place of Business		2a	2a. Mailing Address			4. FEI Number	Applied For			
21	21		26	26			_59-2324388	Not Applicable			
Suite, Apt. #, etc.		27	Suite, Apt. #, etc.			E Cartificate of Status Desired 58	\$8.75 Additional Fee Required				
City & State		28	City & State				, , , , , , , , , , , , , , , , , , , ,				
24	Zip	Country 25	29	Zip	Coun	itry		8. This corporation owes or has paid the current y Personal Property Tax due June 30.			
9. Name and Address of Current Registered Agent								10. Name and Address of New Registered Agent			
MURRAY, JOHN E.					B1	Name					
941 SW 8TH ST POMPANO BCH FL 33069			8	82	Street Addre	Street Address (P.O. Box Number is Not Acceptable)					
					[8	33					
						84	City	FL 85	Zip Code		
11	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 agent and title	if applicable (NOTE	Registered Agent signature regul	Ind when reinstation)	DATE			
12.	OFFICERS AND DIREC		13.	ADDITIONS/CHANGES TO OFFI		S IN 12		
TITLE	PS DELETE		1.1 TITLE	ADDITIONS/OF ENGLS TO OFF	Change	Addition		
NAME	MURRAY, JOHN E		1,2 NAME					
1	941 SW 8TH STREET							
STREET ADDRESS			1.3 STREET ADDRESS					
CITY-ST-ZIP	POMPANO BCH, FL 00000	DELETE	1.4 CITY - ST - ZIP		Change	Addistro		
TITLE	VP	TTI DELESE	2.1 TITLE		Change	Addition		
NAME	MURRAY, MICHAEL E.		2.2 NAME					
STREET ADDRESS	941 SW 8TH STREET		2.3 STREET ADDRESS					
CITY - ST - ZIP	POMPANO BCH, FL 00000		2. 4 CITY - ST - ZIP					
TITLE		DELETE	3,1 TITLE		☐ Change	Addition		
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET ADDRESS					
CITY-ST-ZIP			3.4. CITY-ST-ZIP					
TITLE		DELETE	4,1 TITLE		Change	Addition		
NAME			4, 2 NAME					
STREET ADDRESS			4.3 STREET ADDRESS			ĺ		
CITY - ST - ZIP			4,4 CITY - ST-ZIP					
TITLE		DELETE	5,1 TITLE		☐ Change	Addition		
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET ADDRESS					
CITY-ST-ZIP			5.4 CITY-ST-ZIP					
TITLE		☐ DELETE	6.1 TITLE		Change	Addition		
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET ADDRESS					
000.07.70		-	a (OID) OT TO			1		

14. I hereby certify that the Information supplied with this filing does not adality for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is pide 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.

SIGNATURE:

John E. Murray

1-20-98

954~782-0951