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 # G96832 (2)

RICHARD A. MURNO, P.A.

FILED Apr 24 1998 8:00am Secretary of State

			<u> </u>	
Principal Place of Business	Mailing Address		1 (44)(1) 4212 (2)13 2113 (1)14 (1)14	
3701 TAMIAMI TRAIL	PO BOX 380063			
-PO. BOX 65	₩ P. O. BOX 63°		DO NOT WRITE IN THIS SPACE	
PORT CHARLOTTE FL 33952 US	MURDOCK FL 33938 US		3. Date Incorporated or Qualified	
- 00	•		04/19/1984	
2. Principal Place of Business	2e, Mailing Address		4. FEI Number	Applied For
21	26		59-2390548	Not Applicable
Suite, Apt_#, etc.	Suite, Apt. #, etc.	_		\$8.75 Additional
22 P.O. BOX 380083	27 P.O. BOX 3	80083	5. Certificate of Status Desired L	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28		Trust Fund Contribution	
Zip Country	Zip	Country	8. This corporation owes or has paid th	ne current year Intangible
24 25	29	30	Personal Property Tax due June 30.	Yes No
9, Name and Address of Cu	ırrent Registered Agent		10. Name and Address of New Regist	ered Agent
MACRIS, STEVEN W.		81 Name		1
609 S. TAMIAMI TRAIL		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
VENICE FL 34285		oli del rida	(.c. box (tombol to the trace)	
TEMOETE OTESS		83		
				Total Zin Code
		84 City		FL 85 Zip Code
11. Pursuant to the provisions of Sections 607	7.0502 and 607.1508. Florida Statute	s, the above-named corp	poration submits this statement for the purp	ose of changing its registered
office or registered agent, or both, in the S	Stale of Florida. Such change was a	uthorized by the corpora	tion's board of directors. I hereby accept the	e appointment as registered
agent. I am familiar with, and accept the c	Diligations of, Section 607.0505, Floi	nda Statutes.		
SIGNATURE Signature, typed or printed name of registers	ad agent and title if applicable (NOTE	Registered Agent signature requi	ired when reinstating)	DATE
	S AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12
TITLE DP	☐ DELETE	1.1 TITLE		Change Addition
NAME MURNO, RICHARD A.		1.2 NAME		·
STREET ADDRESS 3701 TAMIAMI TRAIL		1.3 STREET ADDRESS		
CITY-ST-ZIP PORT CHARLOTTE FL		1.4 CITY-ST-ZIP		
TITLE	L. DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	_	2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
		2. 4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE	DELETE	3.1 TITLE		Change Addition
NAME	- Vector	3.2 NAME		_ ,
		3.3 STREET ADDRESS		
STREET ADDRESS		· ·		
CITY-ST-ZIP	DELETE	3.4. CITY-ST-ZIP	441 4-1	Change Addition
TITLE	OLLER	4. 2 NAME		
NAME				
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP	DELETE	4.4 CITY - ST - ZIP		Change Addition
TITLE	C3 DELETE	5.1 TITLE		C crowda C rigorda
NAME		5.2 NAME		
STREET ADDRESS		5 3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		Choone Addison
TITLE	DELETE	6.1 THLE		Change Addition
NAME		6.2 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-SI-ZIP		6.4 CiTY-ST-ZIP		
14. I hereby certify that the information supply	ed with this filing does not qualify fo	r the exemption stated in	Section 119.07(3)(i), Florida Statutes. I furt	her certify that the information