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

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H14177

(0)

2a. Mailing Address

City & State

Suite, Apt. #, etc.

BAGS BY TYLER, INC.

Principal Place of Business

* KENNETH E. NORTON
5448 SELTON AVENUE
JACKSONVILLE FL 32277

2. Principal Place of Business

Suite, Apt. #, etc.

SIGNATURE:

City & State

FILED									
Mar 09 1998 8:00am Secretary of State									
Secretary of State									

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

EH ED

Mailing Address	
% KENNETH E. NORTON 5448 SELTON AVENUE	
JACKSONVILLE FL 32277 US	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified

07/26/1984

59-2458586

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

4. FEI Number

Zip	Country	Ζφ	Count	Country		8. This corporation owes			
24	[25]	29	30	30		Personal Property Tax			No
	9. Name and Address of Curren	1 Registered Agent				10. Name and Address of	of New Registered	Agent	
	orton, Kenneth E.		8	ין יי	Name				
	148 SELTON AVENUE ACKSONVILLE FL 32211		 6	12	Street Addre	ss (P.O. Box Number is Not	Acceptable)		······································
	ONSOMMEE TE OPETT		8	13					
			L	4_			······································		
			8	4 (City		FL	85 Zip	Code
office or r	to the provisions of Sections 607,050 registered agent, or both, in the State im familiar with, and accopt the obliga	of Florida, Such change was	authorized	by th	named corpo ne corporatio	oration submits this statemer on's board of directors. I her	nt for the purpose of eby accept the ap	of changing it pointment as	s registered registered
SIGNATURE	Signature, typed or profind narrie of registered age	nt avel title if armineable (NO)	If Registered A	nen) i	signatura required	when reinstating)	DATE		
12.	OFFICERS AN		13.	gord I		ADDITIONS/CHANGES		D DIRECTOR	S IN 12
TITLE	DP	DELETE	1.1 THTLE	 E				Change	Addition
NAME	NORTON, KENNETH E.		1.2 NAM	E	1			-	
STREET ADDRESS	5448 SELTON AVENUE		1.3 STRE	ET AD	DRESS				
CITY-ST-ZIP	JACKSONVILLE FL		1.4 CITY		1				
TITLE	DT	DELETE	2.1 TITLE					Change	Addition
NAME	NORTON, CARRIE I.		2.2 NAMI	E	Ì				ì
STREET ADDRESS	5448 SELTON AVE.		2.3 STRE	ET AD	DRESS		1 -		
CITY-S1-ZIP	JACKSONVILLE FL		2.4 CITY	/-ST-	ZIP		*		
TITLE		☐ DELĒTE	3.1 TITLE					Change	Addition
NAME			3.2 NAM	E					
STREET ADDRESS			3.3 STAE	ET AD	DRESS				İ
CITY-ST-ZIP			3.4. CITY	- ST-	ZIP				
TITLE		DELETE	4.1 TITLE	E .				Change	Addition
NAME			4. 2 NAM	4E	ĺ				
STREET ADDRESS			4.3 STRE	ET AD	ORESS				
CITY-ST-ZIP			4.4 CITY	-S1-Z	ZIP				
TITLE		DELETE	51 TITLE	F				Change	Addition
NAME			5.2 NAMI	E	1				1
STREET ADDRESS			5.3 STRE	ET AD	DRESS				j
CITY-ST-ZIP	L		5.4 CITY	- 51 - 7	ZIP				
TITLE		DELETE	6.1 TITLE	-				Change	Addition
NAME			6,2 NAM	Ε					Ì
STREET ADDRESS			6.3 STRE	ET AD	DRESS				
CITY-S1-ZIP			6.4 CITY	-S1-2	ZIP				
14. I hereby of indicated	certify that the information supplied we on this annual report or supplementa	th this filing does not qualify f	for the exem curate and t	nptio That i	n stated in S my signature	ection 119.07(3)(i), Florida S shall have the same legal of	Statutes. I further coeffect as if made un	ertify that the nder oath; tha	information at I am an