21     26     59-2443078     InterApplet       Suite, Apt. #, etc.     50-cmt/reade of Status Desired     Set 7, Applet       City & Statio     City & Statio     City & Statio     Statis Applet       City & Statio     City & Statio     City & Statio     Statis Applet       Zip     Country     Zip     Country     Zip     Country       Zip     Country     Zip     Country     Readed to Fees       Zip     Country     Zip     Country     Readed to Fees       Zip     Country     Zip     Country     Readed to Fees       Statis Applet     10     Name and Address of Current Registered Agent     10. Name and Address of New Registered Agent       Chry Statis     Statis Applet     110     Name     Readed to Fees       City City Like FERN RD     Bit     State Address (P.O. Box Number Is Not Acceptable)     Either Address (P.O. Box Number Is Not Acceptable)       LUTZ FL 33549     Bit     State Address (P.O. Box Number Is Not Acceptable)     Either Address (P.O. Box Number Is Not Acceptable)       SIGNATURE     Mame     100     Readed to Fees     Either Address (P.O. Box Number Is Not Acceptable)       SIGNATURE     State Address (P.O. Box Number Is Not Acceptable)     Either Address (P.O. Box Number Is Not Acceptable)       SIMEX Addres     State Address (P.O. Box Number Is Not Acc	FILE NOW: FILING FEE AFT PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEF Sandra Secro	FLORIDA DEPARTMENT OF STATE Sandra B, Mortham Secretary of State DIVISION OF CORPORATIONS		FILED Apr 01 1998 8:00am Secretary of State		
	THE A	MERICA MATCH CO.	· · · · · · · · · · · · · · · · · · ·					
P Principal Place of Business       Za.       Mailing Address       4.       PEI Number       Applied Fr         Suite, Apl. et al.       26       Suite, Apl. et al.       Appl. et al. <th colspan="4">118 W. LUTZ LAKE FERN ROAD 118 W. LUTZ LAKE FERN ROAD</th> <th></th> <th colspan="3"></th>	118 W. LUTZ LAKE FERN ROAD 118 W. LUTZ LAKE FERN ROAD							
2. Principial Place of Business         2a. Maing Address         4. FR Number         Applied Place           21         Suite. Apt. #, etc.         20         Suite. Apt. #, etc.         59-2443078         Number           21         City & State         Suite. Apt. #, etc.         Scite. Apt. #, etc.							····	
Suite, Apt. #, etc         Suite, Apt. #, etc.         St. Certification of Status Desired         St. 75 Acadimous           City & State         27         St. Certification of Status Desired         Fore Required         Fore Required           City & State         28         Cature         St. Certification of Status Desired         \$5.000 May Be           20         Country         28         Trate timed Centribution         Added to Frees           210         20         Country         8. This corporation owes on thes paid the current yreas intengolie or space and Address of Current Registered Agent         10. Name and Address of New Registered Agent           Suite Apt. # and the Difference of the Construction of the Constr	2. Principal F	Place of Business	2a. Mailing Address					Applied For
City & Stato     Country     Za     Za     Country     Za     Country     Za     Za     Za     Country     Za     Za     Za     Za     Country     Za		# ato				59-2443078		Not Applicable
2ip       Country       2ip       Country       1       Added to Fees         2ip       2ip       Country       8. This corporation owes or has paid the currery year intengible         3in       2ip       2ip       Country       9. This corporation owes or has paid the currery year intengible         3in       2ip       2ip       2ip       2ip       0       10. Name and Address of Current Registered Agent         3in       3in       3in       10. Name and Address of New Registered Agent       10. Name and Address of New Registered Agent         110       WEST LUTZ LAKE FERN RD       81       82       Striet Address (P.O. Box Number is Not Acceptable)         111. Pursuant to the provisions of Sections 607.0COP and 607 1508. Florida Statutes. The above named corporation submits this statement for the purpose of changing its register agent. In minate with and except the califyers of Sections 607.0COP and 607 1508. Florida Statutes.       10         SIGMATURE       Signature have of inposed agent and the register agent and the registere agent and the registere a	_	π, θ(C.				5. Certificate of Status Desired		
Zip       Country       Zip       Country       B       Country       B       Personal Property Tax due June 30.       Yes       No         GAUGENS, SERAFIN A.       118 WEST LUTZ LAKE FERN RD       118 WEST LUTZ LAKE FERN RD       11       Name and Address of New Registered Agent         44       City       Estate       Street Address of New Registered Agent       12         56       UTZ LAKE FERN RD       12       Street Address of New Registered Agent       12         64       City       FL       83       14       Name         64       City       FL       83       14       City       16         64       City       FL       85       20       16		0				· •		
AUDENCES       9. Name and Address of Current Registered Agent       10. Name and Address of New Registered Agent         AUDENCES, SERAFIN A. 118 WEST LUTZ LAKE FERN RD LUTZ FL 33549       61       Name         402       Strat Address (P.O. Box Number is Not Acceptable)       82         83       84       City       FL         84       City       FL       85         85       City       FL       85         84       City       FL       85         85       City       FL       85         86       City       FL       85         87       City       FL       85         88       City       FL       85       Zip Code         89       City       FL       85       Zip Code         80       City       FL       85       Zip Code         81       Audoress (P.O. Box Number is Not Acceptable)       Code       Code         82       City       FL       85       City City       Code         83       City City       FL       Bab       City City       Code         84       VSD       City City Sity Lity City       City City City City       City City City City       City City City City City </td <td>Zip</td> <td>i1</td> <td colspan="2"></td> <td>untry</td> <td></td> <td> ·</td> <td></td>	Zip	i1			untry		·	
Hower is the intervence of the constraints of product and their implementation of the provisions of Section is 602.0502 and 507.1506. Florida Statutes     Street Address (P.O. Box Number is Not Acceptable)     Ba     Ba     City     FL     Ba     Street Address (P.O. Box Number is Not Acceptable)     Ba     Ba     City     FL     Ba     Zip Code     City     FL     City	LAUDEN	······································						
12.       OFFICERS AND DIRECTORS       13.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12         ITILE       VSD       DELETE       11 ITILE       Change       Ad         NAME       GAUDENS, FRANK A.       12 NAME       12 NAME       Ad       Ad         STRET ADDRESS       118 W LUTZ LK FERN ROAD       13 STRET ADDRESS       13 STRET ADDRESS       Inte	office or agent. La	registered agent, or both, in the State o am familiar with, and accept the obligat	of Florida, Such change wa lions of, Section 607.0505,	is authoriza Florida Sta	ed by the corpora atutes.	tion's board of directors. I hereby accept	rpose of changing the appointment	) its registered as registered
NAME GAUDENS, FRANK A. 12 NAME 13 STREET ADDRESS	12.							DRS IN 12
TITLE       PD       DELETE       2.1 TITLE       Change       Ad         NAME       GAUDENS, SERAFIN A.       2.2 NAME       2.3 STREET ADDRESS       CITY-SI-ZIP       TAMPA FL       2.4 CITY-SI-ZIP         TITLE       TO       DELETE       3.1 TITLE       Change       Ad         NAME       GAUDENS, GLADYS       2.4 CITY-SI-ZIP       Change       Ad         TITLE       TO       DELETE       3.1 TITLE       Change       Ad         NAME       GAUDENS, GLADYS       3.2 NAME       3.3 STREET ADDRESS       Ad         STREET ADDRESS       118 W LUTZ LK FERN ROAD       3.3 STREET ADDRESS       CITY-SI-ZIP       Ad         TITLE       DELETE       3.4 CITY-SI-ZIP       Ad       Ad       Ad         NAME       DELETE       4.1 TITLE       Ad       Change       Ad         STREET ADDRESS       DELETE       4.1 TITLE       Ad       Change       Ad         NAME       STREET ADDRESS       Ad       STREET ADDRESS       Ad       Ad         STREET ADDRESS       DELETE       S.1 TITLE       Change       Ad         NAME       STREET ADDRESS       S.5 STREET ADDRESS       S.5 STREET ADDRESS       Ad	NAME STREET ADDRESS	GAUDENS, FRANK A. 118 W LUTZ LK FERN ROAD	DELETE	1.2 l 1.3 s	NAME STREET ADDRESS		Chang	
STREET ADDRESS       118 W LUTZ LK FERN ROAD       23 STREET ADDRESS         CITY-SI-ZIP       TO       DELETE       31 TITLE         ITTLE       TO       DELETE       31 TITLE         NAME       GAUDENS, GLADYS       3.2 NAME         STREET ADDRESS       118 W LUTZ LK FERN ROAD       3.3 STREET ADDRESS         CITY-SI-ZIP       TAMPA FL       3.4 CITY-SI-ZIP         VAME       DELETE       4.1 TITLE         STREET ADDRESS       Change       Adv         STREET ADDRESS       DELETE       4.1 TITLE         CITY-SI-ZIP       DELETE       4.1 TITLE         VAME       4.2 NAME       4.2 NAME         STREET ADDRESS       Change       Adv         STREET ADDRESS       DELETE       4.1 TITLE         Change       Adv       4.2 NAME         STREET ADDRESS       4.3 STREET ADDRESS       Change         CHY-SI-ZIP       4.4 CITY-SI-ZIP       Change       Adv         VAME       5.1 TITLE       Change       Adv         STREET ADDRESS       S.3 STREET ADDRESS       Change       Adv			DELETE				Chang	e Addition
ITLE TO Change Add AAME GAUDENS, GLADYS 32 NAME 32 NAME TREET ADDRESS 118 W LUTZ LK FERN ROAD 3.3 STREET ADDRESS TYP-ST-ZIP TAMPA FL 3.4 CITY-ST-ZIP TILE DELETE 4.1 TITLE 1 Change Add AAME 4.2 NAME 4.2 NAME 4.2 NAME STREET ADDRESS 44 CITY-ST-ZIP TILE 1 DELETE 5.1 TITLE 1 Change Add ADDRESS ATY-ST-ZIP 44 CITY-ST-ZIP TILE 1 DELETE 5.1 TITLE 1 Change Add STREET ADDRESS 44 CITY-ST-ZIP	STREET ADDRESS	118 W LUTZ LK FERN ROAD		233	STREET ADDRESS		. •	
TAMPA FL     34. CITY-ST-ZIP       ITLE     DELETE       IAME     DELETE       ITREET ADDRESS     4.2 NAME       STREET ADDRESS     4.3 STREET ADDRESS       XITY-ST-ZIP     44 CITY-ST-ZIP       ITTLE     DELETE       STREET ADDRESS     4.3 STREET ADDRESS       XITY-ST-ZIP     4.4 CITY-ST-ZIP       ITTLE     DELETE       STREET ADDRESS     5.1 TITLE       STREET ADDRESS     5.3 STREET ADDRESS	IITLE	TO	DELETE	3.1 1	INLE		Chang	e 🗌 Addition
ITLE DELETE 4 1 TITLE Change Add IAME 4 2 NAME STREET ADDRESS ATY-ST-ZIP TILE 1 DELETE 5.1 TITLE Change Add ITLE 5.1 STREET ADDRESS IAME 52 NAME STREET ADDRESS STREET ADDRESS	•							-
ATREET ADDRESS ATTY-ST-ZIP AL CITY-ST-ZIP AL CITY-S		IAMPA FL	DELETE				Chang	e 🔲 Addition
ITTLE DELETE 5.1 TITLE Change Adi IAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS				·				
AME 5.2 NAME 5.3 STREET ADDRESS 5.3 STREET ADDRESS			DELETE	·			Chaon	e Addition
	IAME			5.21	NAME			
ITY-ST-ZIP         54 CITY-ST-ZIP           ITLE         DELETE         6.1 TITLE           IAME         62 NAME	ITLE		DELETE	6.11	TILE		Change	a 🛄 Addition
STREET ADDRESS CTY-ST-ZIP III, 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 a 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	STREET ADDRESS			633 640	STREEY ADDRESS CITY - ST - ZIP			