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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STAT

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H18723

(7)

LAURA WALLER INVESTMENTS, INC.

FILED Feb 16 1998 8:00am Secretary of State

LAUHA	WALLER INVESTMENTS, IN	U.]				
Principal Place of Business Mailing Address] '"	BĀIBIL BIBI IIDBI IBIIL IBBIR 11861	Y STOL MUSIC MINICE	Aiell Silii Afbi	
100 N TAMPA STE #2930 TAMPA FL 33 US		100 N TAMPA ST STE #2900 TAMPA FL 33602 US			DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 08/24/1984					
2. Principal P	lace of Business	2a. Mailing Address	≥a. Mailing Address			4. FEI	Number		Ar	oplied For
21		26			5	9-2449550		<u> </u>	ot Applicable	
Suite, Apt. #, etc		Suite, Apt. #, etc.				tificate of Status Desired		* • • • • •	Additional equired	
City & State		City & State				ction Campaign Financing			May Be to Fees	
Zip	Country	Zip	Co	untry			corporation owes or has			
24	25 29 30					1	sonal Property Tax due Ju			No
	9. Name and Address of Current Registered Agent						ne and Address of New	Registered /	Agent	
WA	LLER, LAURA R.			81	Name					
100 N TAMPA ST				82	Street Addr	ess (P.O. E	Box Number is Not Accep	table)		·
STE #2930								,		
TAI	MPA FL 33602			63						
ì				84	City		 		85 Zip	Code
				\perp				FL_		
office or r agent. La SIGNATURE	to the provisions of Sections 607 050, egistored agent, or both, in the State on familiar with, and accept the obligations by provide the color of the obligations.	of Horida, Such change was tions of, Soction 607.0505, Fl and title I applicable (NOT	authorize orida Sta	ed by stutes.	the corporat	ion's board	d of directors. I hereby acc	Cept the app	ointment as	registered
12.	OFFICERS AND DIRECTORS			<u> </u>		ADDI	TIONS/CHANGES TO OF	FICERS AND		
TITLE	PDT L DELETE		1.1 \	1.1 TITLE					Change	
NAME	WALLER, LAURA R.			1.2 NAME						
STREET ADDRESS	100 N TAMPA ST, #2930			1.3 STREET ADDRESS						
CITY-ST-ZIP	TAMPA FL			1.4 CITY-ST-ZIP 2.1 TITLE					Change	Addition
TITLE NAME	L) DELETE			2.2 NAME					CI CHANGE	T VOORIOII
STREET ADDRESS				2.3 STREET ADDRESS						
CITY-ST-ZIP				2.4 CITY-ST-ZIP						
TITLE	DELETE			3.1 TITLE					Change	Addition
NAME				NAME						
STREET ADDRESS			3.3 5	STREET A	ADDRESS					
CITY-ST-ZIP			3.4.	CITY-SI	r-ZIP					
TITLE	DELETE			41 TITLE					Change	Addition
NAME			4.21	NAME						
STREET ADDRESS			4.3 S	STREET #	ADDRESS					
CITY-ST-ZIP			4.4 0	CITY-ST	- ZIP					
TITLE		DELETE	5.1 T	TITLE					Change	Addition

4. 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 armual 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 ompowed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

52 NAME

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

5.4 CITY - \$1 - ZIP

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

13/www

Laura Waller

2/9/28

813 221-1956

Change

Addition