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

**CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**FILED** Apr 30 1998 8:00am Secretary of State

1. Corporatio		# M35 INERS, INC.	768		(1)					) (BA)(B)) B)(BA		
		_										
Principal Place of Business Mailing Address								1		. 1991011 0100 HIST BILL TODIS STEEL TOLI STEEL STEEL STEEL STEEL STEEL STEEL STEEL		
% ROBERT H. THORNTON				% ROBERT H. THORNTON								
2210 N. MONROE ST. TALLAHASSEE FL 32303				2210 N. MONROE ST. TALLAHASSEE FL 32303						DO NOT WRITE IN THIS SPACE		
										3. Date Incorporated or Qualified		
										12/27/1984		
2. Principal Place of Business				2a. Mailing Address					<i>C</i> I	4. FEI Number Applied For		
21 Sulte, Apt.	# Alo	2	26 3044 W Tharpe St Suite, Apt. #, etc.				spe.	24		_		
22 Suke, Apt.	W, <b>B</b> (C).	-  -	27						5. Certificate of Status Desired See Required			
City & State	e		City & State						6. Election Campaign Financing \$5.00 May Be	$\dashv$		
23		2	28 Tallahassee FL				ーレ		Trust Fund Contribution Added to Fees			
Zip		Country		Zip	3 · *3	<b>├</b> ─	Country			8. This corporation owes or has paid the current year Intangible		
24 25				29 <u>3230 3</u> 30						Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent		
Name and Address of Current Registered Agent     THORNTON, SCOTT, H							81	Name 1	~			
	10 N. MON								, ,	om Kichardson		
	LLAHASSEI		82 Street Add				Street A	Addre/	ess (P.O. Box Number is Not Acceptable)			
1							83					
<b> </b> 			84 City				City	Γa	Mahasee FL 85 Zip Code 32303			
11. Pursuant	to the provisi	ons of Sections 60	7.0502 an	d 607.1508,	Florida Stat	ules, th	ne above-	named	corpo	oration submits this statement for the purpose of changing its register.	ha	
office or registered agent, or both, in the State of Florida-Such change was auth agent. I am familiar with and accept the ubligations of Seption 607.0505 Florid							rized by Statutes.	the corp	oratio	on's board of directors. I hereby accept the appointment as registered	d	
SIGNATURE	Signature typed	or printed name of legisle	red agent and		Naco	OTF Regi	stered Agon	t signature	required	ed when reinstating) GATE	ے  -	
12.		OFFICER	S AND DI	RECTORS			13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	ion C	
TITLE	P	TON COOTT HE	NI AND	Ţ	DELETE		1.1 TITLE		40	resident Silliam F. Milford Change Addit	ion	
NAME	AATA LIAVEDINI LAD								$\widetilde{\mathcal{M}}$	397 Olde POST ROAD	2	
STREET ADDRESS		ASSEE FL					1.3 STREET A		쑛	397 Olde Post KOAL allahassee FL 32301	Ĭ	
CITY-ST-ZIP TITLE	V	NOOLE 1 E		7	DELETE	_	1.4 CITY - ST- 2.1 TITLE	- ZIP		Change   Addit	ion C	
NAME	SHRODI	E, DEBORAH A.		•	_,	•	2.2 NAME	ľ				
STREET ADDRESS	RESS 3269 LORD MURPHY TRAIL					1:	2.3 STREET A	uddress				
CITY-ST-ZIP		ASSEE FL					2 4 CITY-ST	- ZIP				
TITLE	81	- 01415150		]	DELETE	<b>T</b> :	3 1 TITLE			Change Addit	tion	
NAME		E, CHARLES	3A III				3.2 NAME				-	
STREET ADDRESS		)RD MURPHY TI	KAIL			ŀ	3.3 STREET A	- 1			İ	
CITY-ST-ZIP	IALLAN	ASSEE FL		· · · · · · · · · · · · · · · · · · ·	DELETE		3.4. CITY-ST	- 7IP		Change Addit	ion	
NAME				ι	יי מנינונ		4.1 TITLE 4. 2 NAME			Li Change Li Adoll	iioii	
STREET ADDRESS	1					- 6	4. 2 NAME 4.3 STREET A	UDBEGG			1	
CITY-ST-ZIP							4.4 CITY-ST-					
TITLE				Π.	DELETE		5.1 TITLE	-"		Change Addit	ion	
NAME						. :	5.2 NAME,					
STREET ADDRESS	-					9	5.3 STREET A	DDRESS				
CITY-ST-ZIP							5.4 CITY - ST-	- <u>Z</u> IP				
TITLE				τ	DELETE	6	6.1 TITLE			☐ Change ☐ Addit	ion	
NAME	i						6.2 NAME					
STREET ADDRESS							6.3 STREET A					
CITY-ST-ZIP	orlify that the	information curp	iod with th	io filipo dosc	not auglifu		6.4 CITY - ST-		d in S	Section 110 07/2Vi) Floring Statutes I further continue that the information	<u></u>	

receipt 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 informatio indicated on this annual report or suppliencential annual 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 copyoration 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 3 if changed or optimalization and address.