## 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

DOCUMENT # H47509 (5)

Principal Place of Business  1325 4TH ST N 8T PETERSBURG FL 33701  DO NOT WRITE IN THIS SPA  3. Date Incorporated or Qualified  03/18/1985  2. Principal Place of Business  2a. Mailing Address  25	Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees Int year Intangible Yes No
### ST PETERSBURG FL 33701  ### ST PETERSBURG FL 33701    DO NOT WRITE IN THIS SP/F   3. Date Incorporated or Qualified     03/18/1985	Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees Int year Intangible Yes No
22   Principal Place of Business   2a, Mailing Address   4. FET Number	Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees Int year Intangible Yes No
2. Principal Place of Business 2a. Mailing Address 2b. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc.  City & State Trust Fund Contribution	Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees Int year Intangible Yes No
26 Suite, Apt. #, etc. Suite, Apt. #, etc.  5. Certificate of Status Desired  City & State City & State City & State City & State Trust Fund Contribution	Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees Int year Intangible Yes No
Suite, Apt. #, etc.  Suite, Apt. #, etc.  27  City & State  Trust Fund Contribution	\$8.75 Additional Fee Required  \$5.00 May Be Added to Fees Int year Intangible Yes No
27 5. Certificate of Status Desired City & State 6. Election Campaign Financing Trust Fund Contribution	Fee Required  \$5.00 May Be Added to Fees nt year Intangible Yes No
City & State City & State 6. Election Campaign Financing Trust Fund Contribution	Added to Fees nt year Intangible Yes No
Trust Fund Contribution	Added to Fees nt year Intangible Yes No
Zip Country Zip Country 8. This corporation owes or has paid the current	Yes No
100	jent
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81. Name	
8275 MANASOTA KEY RD ENGLEWOOD FL 34223  82 Street Address (P.O. Box Number is Not Acceptable) 83	
B4 City FL	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of charge or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appoint agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature, typed or provided name of registered agent and title of applicable. (NOTE: Registered Agent signature required when reinstating).  DATE	ument as registered
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND D	DIRECTORS IN 12
TITLE PD DELETE 1.1 TITLE	Change Addition
NAME ALFLEN, KENNETH 1.2 NAME	
STREET ADDRESS 6275 MANASOTA KEY RD. 1.3 STREET ADDRESS	
CITY-ST-ZIP ENGLEWOOD FL 34223 1.4 CITY-ST-ZIP	
	Change Addition
NAME PARADOWICZ, RONALD 22 NAME	
STREET ADDRESS 449 SANDAL WOOD RD. 2.3 STREET ADDRESS	
CITY-ST-ZIP CANTON MI 48188 2.4 CITY-ST-ZIP	7 Acres 1 1 4 4 4 9 5 1
	☐ Change ☐ Addition
NAME BRICE, PHILIPPE 32 NAME	
STREET ADDRESS 6578 PAUL REVERE 33 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP	
	Change Addition
NAME 4.2 NAME	Tourist Taylin
STREET ADDRESS 4.3 STREET ADDRESS	
City-St-ZiP 4.0 Sincer Automass 4.3 Sincer Aut	
TITLE DELETE STITLE	Change Addition

6.4 CITY-ST-ZIP 14. 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 an 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 Block 12 or Block 13 if changed, or on the attachment with an address.

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

DELETE

**FILED** 

May 12 1998 8:00am

Secretary of State

Addition