FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00					FILED	
COP ANNU	PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		Apr 14 199 Secretary	
DOCUI 1. Corporation		J44114 C.	(3)			
Principal Place 3151 COOPE #54 PUNTA GORD	R ST		Mailing Address 3151 COOPER ST #54 PUNTA GORDA FL 33950		DO NOT WRITE IN THE	
2. Principal P	lace of Business	C+	2a. Mailing Address		11/25/1986 4. FEI Number 59-2782092	Applied For
Suite, Apt.		ZQ_1	Suite, Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State 23 Pun Zip	ta Gorda	- FI	City & State 28 Zip	Country	Election Campaign Financing Trust Fund Contribution This corporation owes or has paid the	_ ·
24 3395		U.S.A dress of Current R		30	Personal Property Tax due June 30. 10. Name and Address of New Register	Yes No
315 PUI	MICO, MARIE 11 COOPER ST. # NTA GORDA FL 33 to the provisions of Segistered agent, or by m familiar with, and	3 950 Sections 607 0502 a	nd 607.1508, Florida Statute Florida. Such change was a ns of, Section 607.0505, Flo	83 84 City	orporation's board of directors. I hereby accept the	St Zip Code Se of changing its registered appointment as registered Code
SIGNATURE	Signature, typed or printed i	name of registered accord a	nd title if annincable (NOTE	Registered Agent signature rec	oulred when reinstating) DA	TE
12.		OFFICERS AND D		13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS	DS D'AMICO, MAR 1408 SEA FAN PUNTA GORDA	DR	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		Change Addition
CITY-ST-ZIP TITLE HAME STREET ADDRESS CITY-ST-ZIP	PD D'AMICO, MICH 1408 SEA FAN PUNTA GORDA	IAEL DR	DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2. 4 CITY - ST - ZIP		Change Addition
TITLE NAME STREET ADDRESS	VP DAMICO, ANTH 304 COCO RID BRANDON FL	IONY	DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP		☐ Change ☐ Addition
CITY-S1-ZIP TITLE NAME STREET ADDRESS	UNIVOIT FL		DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS		Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS			DELETE	4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS		Change Addition
CITY-ST-ZIP				5.4 CITY - ST - ZIP		

TETLE

NAME

STREET ADDRESS

大学のでは、これでは、「一般のでは、「ないでは、「ないでは、「ないでは、「ないでは、「ないでは、「ないでは、「ないでは、「ないでは、「ないでは、「ないでは、「ないでは、「ないでは、「ないでは、「ないでは、「ないでは、「ない

114. 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 an attachment with an address.

SIGNATURE:

489-637-1907

DELETE

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

941-637-1907

Change

Addition