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

**CORPORATION ANNUAL REPORT** 

**19**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**FILED** Apr 20 1998 8:00am Secretary of State

	MENT # <b>K3607</b> 3 IE' INC.	3 (O)		E (ADMINI) AAN KINU DINI DANK KATAA HIJI BIDII DINI	1 <b>4 1 D</b> ec <b>4 1 D</b> ec <b>4 1 Dec</b> 1 <b>4 1 Dec</b>
Principal Place of Business Mailing Address					
% PAUL BOUCHER P.O. BOX 1503		% PAUL BOUCHER P.O. BOX 1503			
PALM CITY FL 34900-0503		PALM CITY FL-34999-6500		DO NOT WRITE IN THIS SPACE	
				<ol> <li>Date Incorporated or Qualified</li> <li>10/03/1988</li> </ol>	
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
Sulte, Apt	# 500	26		65-0082236	Not Applicable
Suite, Apt.	#, OC.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	-1503 25 Country	29 34991-1503 30	Country	This corporation owes or has paid the cur     Personal Property Tax due June 30.	rrent year Intangible Yes No
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered	Agent
	UCHER, PAUL		81 Name		
1006 S.W. WOODCREEK DRIVE		82 Street Add	fress (P.O. Box Number is Not Acceptable)		
PALM CITY FL 34990		83	· · · · · · · · · · · · · · · · · · ·		
			[63]		
			84 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 changing its registered office 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 appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE					
	Signature, typed or printed name of registered agent		egistered Agent signature requ		DIDECTORS IN 10
12. TITLE	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND	Change Addition
NAME	CARR, FRANK	<u></u>	1.2 NAME		
STREET ADDRESS	<b>83</b> 13 SW 42ND AVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	PALM CITY FL		1.4 CITY-ST-ZIP		
TITLE	DST	☐ DELETE	2.1 TITLE		Change Addition
NAME	BOUCHER, PAUL		2.2 NAME		
STREET ADDRESS	1006 SW WOODCREEK DR		2.3 STREET ADDRESS		
CITY-ST-ZIP	PALM CITY FL	I pereze	2. 4 CITY - ST - ZIP		
TITLE	BOUCHER, KATHY	☐ DELET <b>e</b>	3.1 TITLE		Change Addition
NAME	1006 SW WOODCREEK DR	:	3.2 NAME		
STREET ADDRESS	PALM CITY FL		3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	D	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		☐ Change ☐ Addition
NAME	CARR, THERESA		4. 2 NAME		
STREET ADDRESS	<b>33</b> 13 SW 42ND AVE		4.3 STREET ADDRESS		
CITY-ST-ZIP	PALM CITY FL		4.4 CITY-ST-ZIP	•	
TITLE		☐ DELETÉ	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREFT ADDRESS		
CITY-ST-ZIP	All the state of t	The care	5.4 CITY-ST-ZIP		T 01
TITLE	ş.	☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	and that the information and had little	, this filing close not qualify for t	6.4 CHY-ST-ZIP	Section 119 07(3)(i) Florida Statutes 1 further of	etifu that the information

remove certify that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes 1 further certify that the informatio indicated on this annual report is supplied enter 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.