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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K45525

(8)

MERKLE & MAGRI, P.A.

FILED Apr 14 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					ifi bibit bibil bibil \$100 libbi
6510 W LASALLE STREET		5510 W LASALLE STREE	त		
THRD FLOOR TAMPA FL 33607-1462		THIRD FLOOR		DO NOT WRITE IN THIS SPACE	
US	3807-1462	TAMPA FL 33607-1462 US		3. Date Incorporated or Qualified	SPACE
		• •		11/16/1988	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-2918613	Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & Sts	lo .	City & State			Fee Required
23	10	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the co	
24	25	29	30	Personal Property Tax due June 30.	Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
	ERKLE, ROBERT W.		61 Name		
5510 W LASALLE STREET THIRD STREET Third FLOOR			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
1 "	MPA FL 33607	Third PLOOF	83 🚅		
"	ani A I E OOO				
Ì			84 City	FI	L 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the at office or registered agent, or both, in the State of Florida. Such change was authorized				poration submits this statement for the purpose	of changing its registered
office or agent. La	registered agent, or both, in the Stat am familiar with, and accept the obli	e of Florida. Such change was a gations of, Section 607.0505, Fk	authorized by the corpore orida Statutes.	ation's board of directors. I hereby accept the ag	pointment as registered
SIGNATURE					
12.	Signature, typed or printed name of registered a	gent and fille it applicable (NOT ND DIRECTORS	E Registered Agent signature request. 13.	uired when reinstating) OATE ADDITIONS/CHANGES TO OFFICERS AN	IN DIDECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE	ADDITIONS/OFFIANCES TO OFFICENS A	Change Addition
NAME	MERKLE, ROBERT W.	-	1.2 NAME		
STREET ADDRESS	5510 W LASALLE STREET,	THIRD FLOOR	1.3 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL		1.4 CITY-ST-ZIP		
TITLE	SD 1005011 D	☐ DEL€TE	2.1 TITLE		☐ Change ☐ Addition
NAME	MAGRI, JOSEPH D.	TUIDD ELAGO	2.2 NAME		
STREET ADDRESS	5510 W LASALLE STREET, ' TAMPA FL	IMINU FLOOK	2.3 STREET ADORESS	± 1 × 1 × 1	
TITLE	TD	DELETE	2.4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME	MEYTHALER, WARD A.	□ been	3.2 NAME		onengo
STREET ADDRESS	5510 W LASALLE STREET,	THIRD FLOOR	33 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL		3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
HAME	Į.		4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY-ST-ZIP		Change Addition
TITLE ,		☐ DELETE	5.1 TITLE 5.2 NAME		☐ Change ☐ Addition
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP		io- 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10	6.4 CITY - ST - ZIP		
14. I hereby	certify that the information supplied i	with this filing does not qualify fo	or the exemption stated in	n Section 119.07(3)(i), Florida Statutes. I further of	certify that the information

officer or director of the corporation or the receiver or truster 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. 813-281-9000 SIGNATURE: