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 # 1. Corporation Name K45953

(2)

LARRY ALDRICH ENTERPRISES, INC.

Mar 31 1998 8:00am

Secretary of State

ncipal Place of Business	Mailing Address	n iddievir ers eidel erste lener ersen test diest beste eines diest siens diest siens einer jedi
05 BUCKEYE RD	5207 PALMETTO POINT DR	

B	A D	Addition Addition		
Principal Plac		Mailing Address		
3605 BUCKEYE RD PALMETTO FL 34221 US		5207 PALMETTO POINT DR		
		PALMETTO FL 34221 US		DO NOT WRITE IN THIS SPACE
1		••		3. Date Incorporated or Qualified
				11/17/1988
2. Principal P	lace of Business	2a. Mailing Address	. 0 . 1	4. FEI Number Applied For
21	<u> </u>	26 3605 BUCKEY	ie ioaa	65-0101458 Not Applicable
Suite, Apt.	#, etc.	Sulle, Apr. #, etc.	[]	5. Certificate of Status Desired \$8.75 Additional
22		27 PALMETTO	112	Fee Required
City & State	0	City & State		6. Election Campaign Financing \$5.00 May Be
Zip	Country	Zip .	Country	Trust Fund Contribution
	25 Cournry		- 1166	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
24	9. Name and Address of Current		1 20/1	10. Name and Address of New Registered Agent
ALF		, , , , , , , , , , , , , , , , , , ,	81 Name	
	orich, irina 17 palmetto point drive			
			82 Street Add	dress (P.O. Box Number is Not Acceptable)
PALMETTO FL 34221		63		
			84 City	FL 85 Zip Code
11, Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the above-named cor	• - , ,
office or re	egistered agent, or both, in the State of	of Florida, Such change was authors of Section 607 0505, Florid	norized by the corpore	rporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered
	Training the case decopy the conga-	10119 01, 00011011 007.00007 1 101101	a braidioo.	
SIGNATURE	Signature, typed or printed name of registered agen	and title if applicable. (NOTE: Re	egistered Agent signature requ	uired when rainstating) DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE	Change Addition
NAME	ALDRICH, LARRY		1.2 NAME	
STREET ADDRESS	5207 PALMETTO POINT DRIVE		1.3 STREET ADDRESS	
CITY-ST-ZIP	PALMETTO FL 34221		1.4 CITY-ST-ZIP	
TITLE	ST	DELETE	2.1 TITLE	Change Addition
NAME	ALDRICH, IRINA		2.2 NAME	
STREET ADDRESS	5207 PALMETTO POINT DR		2.3 STREET ADDRESS	
CITY-ST-ZIP	PALMETTO FL		2 4 City-St-Zip	
TITLE	VP .	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	Wasden, Ronald		3.2 NAME	
STREET ADDRESS	11386 BUD RODEN RD		3.3 STREET ADDRESS	
CITY-ST-ZIP	PALMETTO FL		3.4. CITY-ST-ZIP	
TITLE		DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CtTY - ST - ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		DELETE	61 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS		•	6.3 STREET ADDRESS	
CITY-ST-ZIP			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 an attachment with an address.