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

n n

TITLE

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

FILED
Apr 23 1998 8:00am
Secretary of State

1.	Corporation Na	me	K53996	5 ((O)						
		•									
Principal Place of Business				Mailing Address					ı taribini bət bildə işilə ibilə ibilə bili atılı alalı bibli bibli bibli bibli bibli bibli bibli		
1350 W. BRANDON BLVD BRANDON FL 33510 US				C/O SANDERS. WALTER 13910 N. DALE MABRY STE 1 TAMPA FL 33618 US					DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified		
2.	Principal Place of Business			2a. Mailing Address					12/28/1988 4. FEI Number Applied For	\dashv	
21	7			26					59-2935659 Not Applicable	\dashv	
1	Suite, Apt. #, etc.			Suite, Apt. #, etc.					— \$8.75 Additional	٦	
22				27					5. Certificate of Status Desired Fee Required		
	City & State			City & State					6. Election Campaign Financing \$5.00 May Be	7	
23		28							Trust Fund Contribution Added to Fees	_	
	Zip	—¬	euntry	Ζιρ	<u> </u>	Country	y		8. This corporation owes or has paid the current year Intangible	-	
24		Name and A	ddress of Current	29 Registered Agen	30]				Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent	\dashv	
						81	Na	ame	10. Hanne Bld Northes of New Helpisteles Agent	┨	
SANDERS, WALTER 13910'NORTH DALE MABRY HWY						-	ļ. <u>.</u> .			╝	
STE ONE					82 Street A			reel Addr	dress (P.O. Box Number is Not Acceptable)	١	
		FL 33618			83					٦	
						04	-		[64] - A	4	
						84	Ci	ty	FL 85 Zip Code		
11	Pursuant to the office or regist agent. I am far	e provisions of ered agent, or miliar with, and	Sections 607.0502 both, in the State (accept the obliga	2 and 607.1508, Flo of Florida, Such chi tions of, Section 60	rida Statules, th ange was author 7.0505, Florida	e abov ized by Statute	e-na y the s.	med corp corporal	rporation submits this statement for the purpose of changing its registered alion's board of directors. I hereby accept the appointment as registered	1	
SI	GNATURE Signer	lufe, lyped or printer	t and till if applicable	(NO)t Regis	tered Age	onl sig	nature requir	WALTER SANDERS 2-24-98			
12			OFFICERS AND			3.		,	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	╗	
ŤIT		•		.1 THUE			☐ Change ☐ Addition	-			
NA.	114400111111021111				2 NAME				1		
	STREET ADDRESS 2202 SHERBROOK DRIVE OITY-ST-ZIP VALRICO FL					.3 STREET				1	
TIT		VPT DELETI			1.4 CITY-ST-ZIP 2.1 TITLE			Change Addition	┨		
NA.	1 **		HI ID A	لبا		.2 NAME			Change C Addition	1	
		CACA CLUDDES CAL COMM		2.3 STREET ADDRESS				١			
	Y-ST-ZIP VALRICO FL						4 CITY-ST-ZIP		•	1	
TiT				3.1 THLE			Change Addition	Η			
NA	4			I.2 NAME							
	REET ADDRESS			3.3 STR		ADDR	ESS				
	Y-ST-ZIP					4 CITY-5					
TIT						1 TITLE			Change Addition	1	
NA	ME .				4	2 NAME		ļ		ſ	
STF	REET ADDRESS				4	3 STREET	ADDR	ESS			
CIT	Y-ST-ZIP				4	4 CITY - S	T-ZIP				

64 CITY-ST-ZIP CITY-ST-ZIP 14. Thereby 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 changes for on an attachment with an address.

PRHAR VAMBOR

PRINCE: **ACCURATION

**PRINCE: **ACC

5.1 TITLE

52 NAME

61 THILE

62 NAME 6.3 STREET ADDRESS

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

DELETE

DELETE

Change

Change

Addition

Addition