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

**PROFIT** CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

	MENT # K7434	• •		 	
Principal Plac	e of Business	Mailing Address			#8# 818M 818M 818M 818M 818M 8#8M 1981
14036 NORTH FLORIDA AVE. TAMPA FL 33613-3233		14038 NORTH FLORIDA AVE. TAMPA FL 33613-3233			
					E IN THIS SPACE
ļ				3. Date Incorporated or Qualified	
9 Principal P	lace of Business	2a. Mailing Address		03/21/1989 4. FEI Number	Applied For
21	iace of Business	26. Walling Address		59-2950626	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CO 75 A 4 200 - 1
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Žip	Country	Zip	Country	8. This corporation owes or has p	
24	25	29	30	Personal Property Tax due Juni	
	g. Name and Address of Currer	t Registered Agent		10. Name and Address of New R	egistered Agent
	iterson, robert f.		81 Name		
14038 N. FLORIDA AVENUE			82 Street	Address (P.O. Box Number is Not Accepta	ble)
j TAI	MPA FL 33613		83		
Į			84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statute	es, the above-named	corporation submits this statement for the	purpose of changing its registered
office or r agent. I a	egistered agent, or both, in the State m familiar uses a count the police	of Florida. Such change was a ations of Se	authorized by the corporida Statutes.	corporation submits this statement for the oration's board of directors. I hereby acceptation	pt the appointment as registered
SIGNATURE	Signature, typeo or pressure, were or registered age	OLANO Line is accessed to the control of the contro	:: Registered Agent signature	required when reinstation	DATE
12.	OFFICERS AN	<del></del>	13.	ADDITIONS/CHANGES TO OFFI	
TITLE	DPS	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	PATTERSON, ROBERT F.		1.2 NAME	•	
STREET ADDRESS	14038 N. FLORIDA AVE.		1.3 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL		1.4 CITY - ST - ZIP		
TITLE	Ţ	C DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	PATTERSON, ROBERT F.		2.2 NAME	A.C	*
STREET ADDRESS	14038 N. FLORIDA AVE.		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	TAMPA FL	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME		<u></u>	3.2 NAME		C Onango C Addition
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP	•		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 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE	· ————————————————————————————————————	Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CITY - ST - ZIP		Ohonea I dame
TITLE		ן טבננונ	6.1 TITLE		Change Addition
NAME STREET ADDRESS			6.2 NAME		
CITY-ST-ZID			6.3 STREET ADDRESS		

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 changed, or on an attachment with a address.

3-11-98

**FILED** 

Mar 20 1998 8:00am

Secretary of State