## 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

(5)

MACEDON CORPORATION

**FILED** Feb 23 1998 8:00am Secretary of State

1								
Principal Place of Business		Mailing Address		E INDENTIL DOF INTEL DIEN BILL DIEN GIN DIEN GENERALE.	AIBII BIBII BIBII BIBII BI	ART DAIDHL HODI		
2725 PARK DRIVE		2725 PARK DRIVE	2725 PARK DRIVE					
SUITE 3 CLEARWATER FL <del>-04023-1923</del>		SUITE 3			DO NOT WRITE IN THIS SPACE			
		3-1023		3. Date Incorporated or Qualified	THIS OF ACE			
**	20163 100)	·· 75 /2	35-702	ر '	05/03/1989		+	
2. Principal F	Place of Business	2a, Mailing Address			4. FEI Number	T A	Applied For	
21		26			59-2951759	N	lot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional	
22 Cia 8 Cta		27				Fee R	Required	
City & Stat	t <del>e</del>	City & State			6. Election Campaign Financing		May Be	
23 Zip 3ろ;	263 - Country	28	Country		Trust Fund Contribution		I to Fees	
24	1023 25 PINELLIS	33763-1023	Country La	LAS	<ol> <li>This corporation owes or has paid Personal Property Tax due June 3</li> </ol>		No I	
	g. Name and Address of Current		30,7		10. Name and Address of New Reg			
FR	REE, LEBRON		81 Nar	me				
2725 PARK DRIVE, SUITE 3				62 Street Address (P.O. Box Number is Not Acceptable)				
CL	EARWATER FL 33783 - 10	23				-,		
			63					
			84 City	<del>,                                      </del>		85 20	eGode → /	
<u> </u>							3-102	
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. La	am <b>fa</b> miliar with, and accept the obligati	ons of, Section 607.0505, Flor	ida Statutes.		•	••	, I	
SIGNATURE	Signature, typed or printed name of registered agent	and title if explicable (NOTE	Registered Agent signs	atura raquirod	urban reinctation)	DATE		
12.	OFFICERS AND		13.	arore required	ADDITIONS/CHANGES TO OFFICE		RS IN 12	
TITLE	PD	DELETE	1.1 TITLE	01		☐ Change	Z Addition	
NAME	NITSOPOULOS, SAM		1.2 NAME	m	ILE KARAMBAT	08	_   2	
STREET ADDRESS	2971 CIELO CIRCLE NORTH		1.3 STREET ADDRES		ARKENA DR.	_	[	
CITY-ST-ZIP	CLEARWATER FL 34619		1.4 CITY-ST-ZIP	SCA	RBOROUGH, ONTA	RIDICA M	17 1X3 8	
TITLE	<b>VP</b> D	DELETE	2.1 TITLE			Change	Addition	
NAME	ALOUSSIS, PETER		2.2 NAME	ŀ				
STREET ADDRESS	1565 BACHELOR DR.	-1	2.3 STREET ADDRES	ss		2111		
CITY-ST-ZIP	DUNEDIN FL 3469	8	2.4 CITY-ST-ZIP			296	70	
TITLE	\$D	☐ DELETE	3.1 TITLE	21	R	☐ Change	☐ Addition	
NAME	KARAMBATOS, ANGELO		3.2 NAME	17/	M KARAMBATOS	j.	ļ	
STREET ADDRESS	34 ARKNOA DRIVE		3.3 STREET ADORES		ARKOVA DR.	121		
CITY-ST-ZIP	SCARBOROUGH ON M1T-1X3		3.4. CITY-ST-ZIP	30	ARBORAUGH, OR	UTAPIDEN	+ 10111	
TITLE	TD .	☐ DELETE	4.1 TITLE			thange	Addition	
NAME	ALOUSSIS, PETER		4. 2 NAME					
STREET ADDRESS	1565 BACHELOR DR.	100	4.3 STREET ADDRES	ss		20/	100	
CITY-ST-ZIP		598	4.4 CITY - ST - ZIP	4			2 2	
TITLE	CHRIS NITSOPELL	☐ DELETE	5.1 TITLE	101	R	☐ Change	Addition	
NAME		**************************************	5.2 NAME	12	GE BACHE LOR	20		
STREET ADDRESS			5.3 STREET ADDRES	ss 15	65 DACHE -OK	190		
CITY-ST-ZIP	CLAMAUNTER, FL34	(6/9)	5.4 CITY-ST-ZIP	24	NEDIN, FL 34	698	Processia.	
TITLE	DIR	DELETE	6.1 TITLE	0	TO ALOUSSIS	Change	Addition	
NAME	20415 NITSOPCA	R.M.	6.2 NAME	10	BACHELM	a DR.	Į	
STREET ADDRESS	2971 61640 61	· · · · · · · · · · · · · · · · · ·	6.3 STREET ADDRES	SS   / S	64		[	

CITY-ST-ZIP

CLC TRUNTEZ | FL 346 | 9 | 6.4 CITY-ST-ZIP | DUNE DIN, FL 346 | 9 |
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in 19.07(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.

2-10-98