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PROFIT CORPORATION ANNUAL REPORT 1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

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Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L19700 (8)

| Principal Place of Business Mailing Address % PHILLIP R. NEGIP 15248 \$ U.S. 41 HIGHWAY 15248 \$ U.S. 41 HIGHWAY FT. MYERS FL 33908 FT. MYERS FL 33908 TT. MYERS FL | Mailing Address % PHILLIP R. NEGIP 15248 \$ U.S. 41 HIGHWAY FT. MYERS FL 33908 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/02/1989 2a. Mailing Address 4. FEI Number Applied For 65-0152205 Not Applicable Suite, Apt. #, etc. 5. Certificate of Status Desired \$8.75 Additional | | | RPORATED | | | |
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| 11. Pursuant to the provisions of Sections 607.0602 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register. | Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes or has paid the current fear intangible Personal Property Tax due June 30. Yes No ent Registered Agent 10. Name and Address of New Registered Agent B1 Name Daniel Negion for the first of full of the first of the | 11. Pursuan | t to the provisions of Sections 607.0 | 0502 and 607.1508, Florida Statute | es, the above-named corp | poration submits this statement for the pr | urpose of changing its registered |
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| 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 registere | Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes or has paid the current/ear Intangible Personal Property Tax due June 30. Yes No ent Registered Agent 10. Name and Address of New Registered Agent B1 Name B1 Name B2 Street Address (P.O. Box Number is Not Acceptable) B3 Street Address (P.O. Box Number is Not Acceptable) B4 City Mark S B5 Zio Code S | 1 | 11/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1/1 | 7777 | mad oldroto. | | שלוטול פ |
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| 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. I am familier with, and accept the oringations of Section 607.0505, Florida Statutes. SIGNATURE Signature of the appointment as registered agent, and accept the appointment as registered agent. I have been accept the appointment as registered agent, and accept the appointment as registered agent. I have been accept the appointment as registered agent. I have been accept the appointment as registered agent. I have been accept the appointment as registered agent. I have been accept the appointment as registered agent. I have been accept the appointment as registered agent. I have been accept the appointment as registered agent. I have been accept the appointment as registered agent. I have been accept the appointment as registered agent. I have been accept the appointment as registered agent. I have been accept the appointment as registered agent. I have been accept the appointment as registered agent. I have been accept the appointment as registered agent. I have been accept the appointment as registered agent. I have been accept the appointment as registered agent. I have been accept the accept the appointment agent accept the appointment as registered agent. I have been accept the | Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes or has paid the current fear intangible Personal Property Tax due June 30. Yes No ent Registered Agent 10. Name and Address of New Registered Agent B1 Name B2 Street Address (P.O. Bolt Number is Not Acceptable) B3 Street Address (P.O. Bolt Number is Not Acceptable) B4 City FL 85 Zip Colo 8 B5 Zip Colo 8 B6 City FL 85 Zip Colo 8 B7 Solution 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered for of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered figations of Section 607.0505, Florida Statutes. | SIGNATURE | SI TON O WAY OF THE PROPERTY OF | Minister Dr Hoom | Barner Co Ark (Taigna I) group | milliple. Negio | 3/8/9.0 DATE |
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| ### FT. MYERS FL 33908 FT. MYERS FL 33908 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/02/1989 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0152205 Not Applied For Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required City & State City & State City & State City & State FT. MYERS FL 33908 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/02/1989 4. FEI Number 65-0152205 Not Applied For Space Fee Required \$8.75 Additions Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Re | FT. MYERS FL 33906 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/02/1989 4. FEI Number Applied For Not Applicable Suite, Apt. #, etc. 5. Certificate of Status Desired \$8.75 Additional | | | | w | | |
| 15248 \$ U.S. 41 HIGHWAY 15248 \$ U.S. 41 HIGHWAY FT. MYERS FL 33908 DO NOT WRITE IN THIS SPACE | 15248 \$ U.S. 41 HIGHWAY DO NOT WRITE IN THIS SPACE | Principal Pla | ce of Business | Mailing Address | | | ir diāls Bibit ālāli brāts Zibit ālsti svai |
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14. 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 of 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. 2/icla a