## 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 # L32911

(4)

## FILED Apr 23 1998 8:00am Secretary of State

	HOLDINGS, INC.			
Principal Plac	ce of Business	Mailing Address		1 (02)50 200 )(1)5 (015 15)5 (15)5 (15)6 (
4952 MARLIN DR NEW PORT RICHEY FL 34652 US		4952 MARLIN DR NEW PORT RICHEY FL 34652 US		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
	Diameter 10			11/30/1989
h	Place of Business	2a. Mailing Address		4. FEI Number Applied Fo
Suite, Apt	# atc	Suite, Apt #, etc.		59-2978095   Not Applic   \$8.75 Additions
22	w, Bic.	27		5. Certificate of Status Desired Fee Required
City & Sta	ile	City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	Country	Zg)	Country	8. This corporation owes or has paid the current year Intangible
24	25		30	Personal Property Tax due June 30. 🔲 Yes 🔀 No
<b></b>	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registered Agent
	Nuber, W.E.		81 Nam	me
	52 Marlin dr.		<b>82</b> Stre	eet Address (P.O. Box Number is Not Acceptable)
NE NE	EWPORT RICHEY FL 34652		<u> </u>	
			83	
			84 City	y 85 Zip Code
				ned corporation submits this statement for the purpose of changing its register corporation's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of logistered ag	post and life of applicable (NOTE	Registered Agent signa	nature required whon rousstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DP	DELETE	1.1 TrTLE	Change Add
NAME	FAUBER, W.E		1.2 NAME	
STREET ADDRESS	4952 MARLIN DR		1 3 STREET ADDRES	iss i
CITY-ST-7IP	NEW PORT RICHEY FL		14 CITY - ST - ZIP	
TITLE	DV	☐ DELETE	2 1 TITLE	☐ Change ☐ Add
NAME	PRICE, S.K		2 2 NAME	
STREET ADDRESS			2 3 STREET ADDRES	SS
CITY - ST - ZIP	NEW PORT RICHEY FL		2 4 CITY - ST - ZIP	
TITLE	D	DELETE	3.1 TITLE	☐ Change ☐ Add
NAME	PRICE, S.K.		3.2 NAME	
STREET ADDRESS	4952 MARLIN DR.		3.3 STREET ADDRES	SS
CITY-ST-ZIP	NEW PORT RICHEY FL	DELETE	3.4. CITY-ST-ZIP	Change Add
TITLE	DTS FAUBER, S.S.	□ bettie	4.1 TITLE	
NAME OTBEET ADDRESS			4. 2 NAME	29:
STREET ADDRESS	FORT WORTH TX		4.3 STREET ADDRES	»
CITY-SI-24P TITLE	TONI WOMIT IA	DELETE	4.4 CITY - ST - ZIP 5.1 TITLE	Change Add
NAME			5.2 NAME	
STREET ADDRESS			53 STREET ADDRES	ass
CITY-ST-ZIP	1		54 CHTY-ST-ZIP	
TITLE		DELETE	61 TRILE	☐ Change ☐ Add
NAME	į		6.2 NAME	
STREET ADDRESS			6 3 STREET ADDRES	28:
CITY-SI-ZIP			6.4 CITY - ST - ZIP	
	certify that the information supplied v	with this filing does not qualify for		stated in Section 119.07(3)(i). Florida Statutes, I further certify that the informal

14. Thereby certify that the information supplied with fins 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 is 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.

SIGNATURE:

II muke

5.S. FAUBER

2/1/98