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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L34641

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| May | 13 | 1998 | 8:00am |
| Sec | cret | ary of | State |

| BRIAN | D. STRAND, C.P.A., P.A. | (-) | | | | | | |
|---|--|---|--|--|---|--------------------------------------|---------------------|--------------------|
| Principal Plac | e of Business | Mailing Address | | · · · · · · · · · · · · · · · · · · · | | iliti bil ta t osan asatt att | HA BARIF OLAFI OLDI | 0(0)) <u>100</u> 1 |
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| US | | US | | | 3. Date Incorporated or C | Qualified | | |
| | | | | | 12/15/1989 | | -1 | |
| | Place of Business | 2a. Mailing Address | | | 4. FEI Number | | | plied For |
| 21 | | 26 | | | 65-0160293 | | | t Applicable |
| Sulte, Apt. | #, G IC. | Suite, Apt. #, etc. | | | 5. Certificate of Status De | sired 🔲 | \$8.75 A | |
| 22 City & Stat | | City & State | | | | | Fee Re | |
| | te | · | | | Election Campaign Fin Tauct Fund Contribution | · - | \$5.00 | |
| 23 Zip | Country | 28 Zip | T Cov | untry | Trust Fund Contribution | | Added to | |
| | ├ | ├ ── | \vdash | andy | 8. This corporation owes | • | | angible] No |
| 24 | 25 9. Name and Address of Curr | 29 ent Replatered Agent | 30 | 1 | Personal Property Tax 10. Name and Address of | | | , 140 |
| . 64 | | on negistered right | | 81 Name | | THOM TIOGRAPHOTO | , Agont | |
| | E, H. GREG | | | | | | | |
| | 14 FOURTH ST | | | 82 Street | Address (P.O. Box Number is Not | Acceptable) | | 1 |
| \$A | RASO TA FL 34237 | | | 83 | · | | | |
| | | | | " | | | | |
| | | | | 84 City | | FI | 85 Zip C | >ode |
| 44 Distance | to the provisions of Spotions COZO | EOO and EOO 1EOD Florida Chat | uton the e | hour pamae | Learnestian submits this statemen | | | rogintared |
| office or r | to the provisions of Sections 607.0 registered agent, or both, in the Sta am familiar with, and accept the obl | duz and 607, 1506, Florida Stat de of Florida. Such change was | otes, trie a s authorize | d by the cor | poration's board of directors. I here | by accept the ap | pointment as | registered |
| agent. I a | am familiar with, and accept the obt | igations of, Section 607.0505, I | Florida Sta | tutes. | | | | _ |
| SIGNATURE | | | | | | | | |
| 12. | Signature, typed or printed name of registered in | ROPPIL AND DIRECTORS | JII. Hegislere | id Agent signatur | e required when reinstating) ADDITIONS/CHANGES | DATE | ID DIRECTOR | S IN 12 |
| TITLE | D | DELETE | 1.1 (| | ADDITIONS/CITARGES | TO OTT TOCKS AT | Change | Addition |
| NAME | STRAND, BRIAN D. | | 1.2 N | | | | | |
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| | SARASOTA FL | | | | } | | | |
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14. I 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 or suppliemental 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.