## 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 # L39260

(9)

## FILED Apr 22 1998 8:00am Secretary of State

COPIES TOMORROW OF SARASOTA, INC.					
Principal Place	of Business	Mailing Address		1 (60)(61) 100 (1)(0 (0)(0 (1)(0 0)(1)(0 0)(1)	
4152 INDEPENDENCE CT 4152 INDEP		4152 INDEPENDENCE CT			
STE C-4		STE C-4		DO NOT WRITE IN THI	S SPACE
SARASOTA FL 34234 US		SARASOTA FL 34234 US		3. Date Incorporated or Qualified	
00		00		01/01/1990	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0171922	Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		Di Continozio di Gizido Dostida	Fee Required
City & State		City & State		6. Election Campaign Financing	<b>\$5.00</b> May Be
23	Country	28	Country	Trust Fund Contribution	Added to Fees
<b>Z</b> ip	Country	Zip	Country 30	This corporation owes er has paid the of Personal Property Tax due June 30.	Yes No
24	9. Name and Address of Currer		30	10. Name and Address of New Registere	
CHRISTIANSEN & DEHNER, P.A.  81 Name					
	75 BEE RIDGE RD		00 Ctrast	Address (P.O. Box Number is Not Acceptable)	
STE C			82 Street	Address (P.O. Box Number is Not Acceptable)	
	RA <b>S</b> OTA FL 34239		83		
			84 City		85 Zip Code
				F	
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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
agent. I am tamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE					
12.	Signature, typed or printed name of registrated agr	ent and title if applicable (NOTE: ID-DIRECTORS	: Registered Agent signature 13.	e required when reinstating)  ADDITIONS/CHANGES TO OFFICERS A	
TITLE	P	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	JOHN HARTNETT	<del></del>	1.2 NAME		
STREET ADDRESS	8010 41ST AVE., E		1.3 STREET ADORESS		
CITY-ST-ZIP	BRADENTON FL		1.4 CITY-ST-ZIP		
TITLE	<b>V</b> P	☐ DELETE	2.1 TITLE		Change Addition
NAME	VALERIEJEAN HARTNETT		2.2 NAME		
STREET ADDRESS	8010 41ST AVE., E		2.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON FL		2. 4 CITY - ST - ZIP		
TITLE	ST MALEDIE IEAN MADANETY	☐ DELETE	3.1 TITLE		Change Addition
NAME	VALERIEJEAN HARTNETT		3.2 NAME		
STREET ADDRESS	8010 41ST AVE., E Bradenton Fl		3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	BRADENTON FL	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME		bond warming	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		ļ
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	partity that the information supplied w	with this filling door not qualify for	6.4 CITY-ST-ZIP	 ed in Section 119 07(3)(i) Florida Statutes   further	certify that the information
14. LUGIEDA	county that the phormation supplied v	via ans iming does not quality to	a the exemption state	ed in Section 119.07(3)(i), Florida Statutes. I further	under oath: that I am an

indicated on this annual report or supplemental arrival 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 of the seeker of the see

7/98 351-2512

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