DOCUMENT # 1 45327

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Feb 18, 1999 8:00 am Secretary of State

02-18-1999 90011 031 ***150.00

1. Corporatio	on Name TERPRISES,	INC.										11 8 11	
Bringing! Dies	o of Dusiness			iling Addroos				-			IBIN BIBIN BIBIN	HAN AND HAR	
Principal Place of Business Mailing Address 15372 POOSEVELT BLVD 15372 POOSEVELT BLVD								}					
15373 ROOSEVELT BLVD 15373 ROOSEVELT BLVD SUITE 200 SUITE 200					٧U								
CLEARWATER FL 34620 CLEARWAT				ARWATER FL 3462	NATER FL 34620			DO NOT WRITE IN THIS SPACE					
US			, US					3. Date Incorporated 0 01/26/1990	or Qualifed				
2. Principal Place of Business				Mailing Address				4. FEI Number	:		A	oplied For] ::
21			26					65-0171687				ot Applicable	l ig
Suite, Apt. #, etc.			27									Additional equired	
City & State			28	City & State				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees					
Zip		Country		Zip		ountry		8. This corporation ov	es the curre	nt year int	angible		١.
24	25		29		30			Personal Property			☐ Yes	□N ₀	ļ
	9. Name an	d Address of C	urrent Regis	tered Agent	<u> </u>			10. Name and Addres	s of New R	egistered	Agent		ł
HIN	TER PAIN					81	Name				•		ļ
LUNTER, PAUL 15373 ROOSEVELT BLVD						82	Street Addre	ess (P.O. Box Number is	Vot Accepta	ble)			1
SUITE 200						83		5 At 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	. 2 3 . 3 - 5	<u> </u>	100 TV 40 V 1	e Kristanie regis	ł
	ARWATER FL	34620				63			设图 提高	排作	为温德		1 -
			•			84	City			FL	.] .]	Códe	
TI.) GIOGGIA	reaistered aaent.	or both, in the	State of Florid	a Such change wa	ae authoriza	ad but		pration submits this staten	ereby accept	the appoi	atmont as ro	gistered	ı
agent. I a	am familiar with,	and accept the control of the contro	obligations of, Pa	Section 607.0505, U L UNT applicable. (1	Florida Sta E C NOTE: Register	atutes.		when reinstating)	:1/	Z7	99		-
agent. I a SIGNATURE 12.	am familiar with, Signature, typed or p	and accept the control of the contro	obligations of,	Section 607.0505, ULUNT applicable. (1)	Florida Sta E F NOTE: Register	atutes. red Agent		when reinstating) · · · · · · · · · · · · · · · · · · ·	:1/	Z7	99 ID DIRECTO	DRS IN 12	
agent I a SIGNATURE 12. TITLE	Signature, typed or p	and accept the	obligations of, Pa	Section 607.0505, U L UNT applicable. (1	Plorida State POTE: Register 13	ratutes. red Agent 3. TITLE		when reinstating)	:1/	Z7	99		
agent I a SIGNATURE 12. TITLE NAME	Signature, typed or p	rinted name of register OFFICEF	obligations of, Pa red agent and title if	Section 607.0505, ULUNT applicable. (1)	Florida State Florida State 13 1.1	red Agent 3. TITLE NAME	signature required	when reinstating) · · · · · · · · · · · · · · · · · · ·	:1/	Z7	99 ID DIRECTO	DRS IN 12	100,777,700
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed or p DP LUNTER, PA 12000 4TH S	or of the original o	obligations of, Pa red agent and title if	Section 607.0505, ULUNT applicable. (1)	Florida State Company	red Agent 3. TITLE ! NAME	signature required	when reinstating) · · · · · · · · · · · · · · · · · · ·	:1/	Z7	99 ID DIRECTO	DRS IN 12	100177
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or p	or of the original o	obligations of, Pa red agent and title if	Section 607.0505, ULUNT applicable. CTORS	Florida State Property 13 1.1 1.2 1.3 1.4	red Agent 3. TITLE NAME STREET	signature required	when reinstating) · · · · · · · · · · · · · · · · · · ·	:1/	Z7	99 D DIRECTO	DRS IN 12	100,117,100,100,00
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or p DP LUNTER, PA 12000 4TH S	or of the original o	obligations of, Pa red agent and title if	Section 607.0505, ULUNT applicable. (1)	Florida State	red Agent 3. TITLE NAME STREET	signature required	when reinstating) · · · · · · · · · · · · · · · · · · ·	:1/	Z7	99 ID DIRECTO	DRS IN 12	100000000000000000000000000000000000000
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DP LUNTER, PA 12000 4TH S ST. PETERS	or of the original o	obligations of, Pa red agent and title if	Section 607.0505, ULUNT applicable. CTORS	Florida State	red Agent 3. TITLE NAME STREET CITY-ST- TITLE NAME	signature required ADDRESS	when reinstating) · · · · · · · · · · · · · · · · · · ·	:1/	Z7	99 D DIRECTO	DRS IN 12	1001000
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	DP LUNTER, PA 12000 4TH S ST. PETERS	or of the original o	obligations of, Pa red agent and title if	Section 607.0505, ULUNT applicable. CTORS	Florida State	red Agent 3. TITLE NAME STREET CITY-ST- TITLE NAME STREET	address ADORESS ADORESS	when reinstating) · · · · · · · · · · · · · · · · · · ·	:1/	Z7	99 D DIRECTO	DRS IN 12	100,441,400,000
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DP LUNTER, PA 12000 4TH S ST. PETERS	or of the original o	obligations of, red agent and title if RS AND DIRE	Section 607.0505, ULUNT applicable. CTORS	Florida State 13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4	red Agent 3. TITLE NAME STREET CITY-ST- TITLE NAME	address ADORESS ADORESS	when reinstating) · · · · · · · · · · · · · · · · · · ·	:1/	Z7	99 D DIRECTO	DRS IN 12	(00,44) 400 TOOL
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP LUNTER, PA 12000 4TH S ST. PETERS	or of the original o	obligations of, red agent and title if RS AND DIRE	Section 607.0505, ULUNT applicable. CTORS DELETE	Florida State	red Agent 3. TITLE NAME STREET CITY-ST- TITLE NAME STREET STREET CITY-ST-	address ADORESS ADORESS	when reinstating) · · · · · · · · · · · · · · · · · · ·	:1/	Z7	D DIRECTO Change	DRS IN 12 Addition	2001000
agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OP LUNTER, PA 12000 4TH S ST. PETERS	or of the original o	obligations of, red agent and title if RS AND DIRE	Section 607.0505, ULUNT applicable. CTORS DELETE	Florida State	red Agent 3. TITLE NAME STREET TITLE NAME STREET TITLE STREET TITLE STREET TITLE NAME	address ADORESS ADORESS	when reinstating) · · · · · · · · · · · · · · · · · · ·	:1/	Z7	D DIRECTO Change	DRS IN 12 Addition	
Agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	OP LUNTER, PA 12000 4TH S ST. PETERS	or of the original o	obligations of, red agent and title if RS AND DIRE	Section 607.0505, ULUNT applicable. CTORS DELETE	Florida State	red Agent 3. TITLE NAME STREET TITLE NAME STREET TITLE STREET TITLE STREET TITLE NAME	ADORESS ADORESS ADORESS ADORESS ADDRESS	when reinstating) · · · · · · · · · · · · · · · · · · ·	:1/	Z7	D DIRECTO Change	DRS IN 12 Addition	2001000
AGENTURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OP LUNTER, PA 12000 4TH S ST. PETERS	or of the original o	obligations of, red agent and title if RS AND DIRE	Section 607.0505, ULUNT applicable. CTORS DELETE	Florida State	red Agent 3. TITLE NAME STREET TITLE NAME STREET CITY-ST TITLE NAME STREET TITLE NAME STREET	ADORESS ADORESS ADORESS ADORESS ADDRESS	when reinstating) · · · · · · · · · · · · · · · · · · ·	:1/	Z7	D DIRECTO Change	DRS IN 12 Addition	1001000
AGENTURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OP LUNTER, PA 12000 4TH S ST. PETERS	or of the original o	obligations of, PA red agent and title if RS AND DIRE	Section 607.0505, ULUNT i applicable. CTORS DELETE	Florida State	red Agent 3. TITLE NAME STREET CITY-ST- TITLE NAME STREET 4 CITY-ST TITLE NAME STREET CITY-ST CITY-ST CITY-ST CITY-ST CITY-ST CITY-ST CITY-ST CITY-ST	ADORESS ADORESS ADORESS ADORESS ADDRESS	when reinstating) · · · · · · · · · · · · · · · · · · ·	:1/	Z7	D DIRECTO Change	ORS IN 12 Addition Addition	
AGENTURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DP LUNTER, PA 12000 4TH S ST. PETERS	or of the original o	obligations of, PA red agent and title if RS AND DIRE	Section 607.0505, ULUNT i applicable. CTORS DELETE	Florida State	red Agent 3. TITLE NAME STREET CITY-ST. TITLE NAME STREET STREET CITY-ST. TITLE NAME STREET CITY-ST. TITLE NAME STREET CITY-ST. TITLE	ADORESS ADORESS ADORESS ADORESS ADDRESS	when reinstating) · · · · · · · · · · · · · · · · · · ·	:1/	Z7	D DIRECTO Change	ORS IN 12 Addition Addition	
AGENTURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DP LUNTER, PA 12000 4TH S ST. PETERS	or of the original o	obligations of, PA red agent and title if RS AND DIRE	Section 607.0505, U	Florida Sta 2	red Agent 3. TITLE NAME STREET CITY-ST. TITLE NAME STREET STREET CITY-ST. TITLE NAME STREET CITY-ST. TITLE NAME STREET CITY-ST. TITLE	ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	when reinstating) · · · · · · · · · · · · · · · · · · ·	:1/	Z7	D DIRECTO Change Change	ORS IN 12 Addition Addition Addition	
AGENTURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	DP LUNTER, PA 12000 4TH S ST. PETERS	or of the original o	obligations of, PA red agent and title if RS AND DIRE	Section 607.0505, ULUNT i applicable. CTORS DELETE	Florida Sta 13 1.1 12 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 4.1 4.2 4.3 4.4 5.1	ATUITE AME STREET CITY-ST TITLE NAME CITY-ST TITLE NAME CITY-ST TITLE CITY-ST TITLE	ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	when reinstaining) ADDITIONS/CHANG	:1/	Z7	D DIRECTO Change	ORS IN 12 Addition Addition	
AGENTURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP LUNTER, PA 12000 4TH S ST. PETERS	ont accept the control of the contro	obligations of, red agent and title if RS AND DIRE	Section 607.0505, U	Florida Sta 2	red Agent 3. TITLE NAME STREET CITY-ST. TITLE NAME STREET CITY-ST. TITLE NAME STREET CITY-ST. TITLE NAME STREET CITY-ST. TITLE NAME CITY-ST. TITLE NAME STREET CITY-ST. TITLE NAME STREET CITY-ST. TITLE	ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	when reinstating) · · · · · · · · · · · · · · · · · · ·	:1/	Z7	D DIRECTO Change Change	ORS IN 12 Addition Addition Addition	
AGENTURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DP LUNTER, PA 12000 4TH S ST. PETERS	ont accept the control of the contro	obligations of, red agent and title if RS AND DIRE	Section 607.0505, U	Florida Sta 2	red Agent 3. TITLE NAME STREET CITY-ST TITLE STREET CITY-ST TITLE STREET CITY-ST TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-ST TITLE NAME STREET STREET CITY-ST TITLE NAME STREET	ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	when reinstaining) ADDITIONS/CHANG	:1/	Z7	D DIRECTO Change Change	ORS IN 12 Addition Addition Addition	100 PT 100 LOGO
AGENTURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP LUNTER, PA 12000 4TH S ST. PETERS	ont accept the control of the contro	obligations of, red agent and title if RS AND DIRE	Section 607.0505, U	Florida Sta 2	ACITY-ST TITLE NAME STREET OCITY-ST	ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	when reinstaining) ADDITIONS/CHANG	:1/	Z7	D DIRECTO Change Change Change	DRS IN 12 Addition Addition Addition Addition Addition	SOUTH TOOLSON
AGENTURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DP LUNTER, PA 12000 4TH S ST. PETERS	ont accept the control of the contro	obligations of, red agent and title if RS AND DIRE	Section 607.0505, U	Florida Sta 13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 4.1 4.2 4.3 4.4 5.1 5.2 5.3 5.4	ACITY-ST TITLE NAME STREET CITY-ST TITLE NAME	ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	when reinstaining) ADDITIONS/CHANG	:1/	Z7	D DIRECTO Change Change	ORS IN 12 Addition Addition Addition	
AGENTURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP LUNTER, PA 12000 4TH S ST. PETERS	ont accept the control of the contro	obligations of, red agent and title if RS AND DIRE	Section 607.0505, U	Florida Sta P	ATUITE NAME STREET CITY-ST TITLE NAME STREET NAME NAME STREET NAME NAME NAME NAME NAME	ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	when reinstaining) ADDITIONS/CHANG	:1/	Z7	D DIRECTO Change Change Change	DRS IN 12 Addition Addition Addition Addition Addition	COLOGO

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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

1/27/99 727-536-

36-50

me Phone #