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 #

L74686

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Jan 21	1998 8:00am	Ì
Secre	etary of State	

WILLIS	PULFY	UOD COMPANT, IP	1 0.									
Principal Plac	ce of Busines	SS	Mailir	ng Address					-	PAN UNDIA UNDI	1 01814 01811 B	AND HER PORT
WILLIAM E	WILLIS JR		96W	ILLIAM E WILLIS JA	1							
CORNER OF GADSDEN AVE & 8TH ST BOX 97 CORNER OF GADSDI					TH S	T BOX	97	DO NOT WRITE	E IN THIS	SPACE		
GREENSBORO FL 32330 GREENSBORO FL 32330 WI WI						3. Date Incorporated or Qualified	L 114 17110	JI ROL				
			***						05/22/1990			
2. Principal F	Place of Busi	ness	2a. M	ailing Address					4. FEI Number			Applied For
21			26	Ť					59-3011357			lot Applicable
Suite, Apt	#, etc.		St	uite, Apt. #, etc.							\$8.75	Additional
22			27						5. Certificate of Status Desired		Fee F	Required
City & Stat	te		C C	ity & State					6. Election Campaign Financing	_		May Be
23			28		7 - 5-				Trust Fund Contribution			to Fees
Zip		Country 25	Zi	þ	———	untry			8. This corporation owes or has pa	_		ntangible No
24	9 Name	and Address of Curren	29 t Register	ed Agent	30	1			Personal Property Tax due June 10. Name and Address of New Re			☐ N0
\Ar	ILUS, WILL		r riogisto.	ou Agoin		81	Name		TO. THE PROPERTY OF THE PARTY	Sieroida	- agoint	
		GADSDEN AVE & 8TH	4 CT									
		10 FL 32330	101			82	Street	Addre	ss (P.O. Box Number is Not Accepta	ble)		
•	ILLITODO	IO I E DEGGO				83					-	
						84	City			FL	85 Zip	Code
11. Pursuant office or agent. I s	to the provis registered ag am familiar w	sions of S ections 607,050, gent, or both, in the Staté rith, an d accept the obliga	2 and 607. of Florida ations of, S	1508, Florida Statu Such change was ection 607.0505, F	ites, the a authorize lorida Sta	bove d by	the cor	corporporporatio	ration submits this statement for the in's board of directors. I hereby acce		changing ointment a	its registered s registered
SIGNATURE												
12,	Signature, types	d or printed name of registered age OFFICERS AND					nl signatur	e required	when reinstating) ADDITIONS/CHANGES TO OFFI	DATE	NUBERTO	DO IN 10
TITLE	I D	OFFICERS AND	DINECTO	DELETE	13. 1.1 T			Т.—	ADDITIONS/CHANGES TO OFFI	CENS AND	Change	
NAME	_	, WILLIAM E JR.			1.2 N			l			C Change	
STREET ADDRESS		R OF GADSEN AVE 8	TR HTR	ROY 97			ADDRESS					
CITY-ST-ZIP		SBORO FL				ITY-S						
TITLE		100000		DELETE	2.1 T		1-211	 			Change	Addition
NAME				_	2.2 N	IAME						
STREET ADORESS							ADDRESS					
CITY - ST- ZIP	[2.40	CITY-S	ST-ZIP					
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NAME)				3.2 N	IAME		1				
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CITY-S1-ZIP					3.4. (CITY-S	T-ZIP					
TITLE	}			DELETE	4.13			1			L Change	Addition
NAME					4.21	MANE						
STREET ADDRESS					4.3 S	TREET	ADDRESS					
CITY-S1-ZIP	<u> </u>			DI DI ESS		ITY-S	T-ZIP	 _	and the Control of th		T-1	T
TITLE				DELETE	5.1 T						Change	Addition
NAME	J				52 N			}				
STREET ADDRESS							ADDRESS					
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TITLE]			L. DECEIE	6.1 T			j			L. Unange	☐ Addition
NAME STREET ADDRESS					6.2 N		ADDDCCC					
STREET ADDRESS							ADDRESS					
CITY-ST-ZIP	a a milit a shank sh	1 1.4 CO 100 CO	de transfer		6.4 C	ITY-S	I-ZIP	1	110 07/01/0 51-1-1- 01-1-1-1			~ ~~

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.

SIGNATURE:

William E. Willie he

1-10-98

(850)442-6121