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 #

(3)

FILED						
Apr 14 1998 8:00am						
Secretary of State						

i Hubba	rd and associates, II	1 C.				
Principal Plac	e of Business	Mailing Address		· · · · · · · · · · · · · · · · · · ·	1 100(1011 08) 10196 (1086 01111 01011 01011 01011	IBIT BIBIT BIBIT BIBIT 1981
120 E. STATE		120 E. STATE ST.				
SUITE 103 SUITE 103					DO NOT WOITE IN THIS SPACE	
OLDSMAR FL 34677 OLDSMAR FL 34677				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		IS SPACE
					06/19/1990	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-3016208	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27			S. Cermicate of Status Desired	Fee Required
City & State	9	├ ── ─	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	Z _I p	Cour	nime	Trust Fund Contribution	Added to Fees
24	25	29	30	шу	This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible X Yes No
<u> </u>	g. Name and Address of Cur		<u></u>		10. Name and Address of New Registers	
SMITHERS, JOHN KELLY				81 Name		
120 EAST STATE STREET				82 Street Add	ress (P.O. Box Number is Not Acceptable)	·
	STE. 103			31661 7001	ress (r.o. box raumber is not noteptable)	
	DSMAR FL 34877		ſ	83		
				84 City		. 85 Zip Code
				1 "		'L
11. Pursuant	to the provisions of Sections 607.0	0502 and 607.1508, Florida Sta	atutes, the ab	ove-named corp	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	e of changing its registered
agent. I a	m familiar with, and accept the ob	ligations of, Section 607.0505	, Florida Statu	utes.	north board of directors. Thoroby accept the a	appointment as registered
SIGNATURE		· — · — · — · — · · · · · · · · · · · ·		****		
12.	Signature, typed or printed name of registered	AND DIRECTORS	NOTE: Registered	Agent signature requi	red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	
TITLE	P	DELETE	1.1 111	IF .	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	HUBBARD, PAUL		1.2 NA			
STREET ADDRESS	12 RUE LACOUR			REET ADDRESS		
CITY-ST-ZIP	CANNES FRANCE 06400		1.4 C(T	Y-ST-ZIP		
TITLE	VST	DELETE	2.1 TIT			☐ Change ☐ Addition
NAME	HUBBARD, MARCELINE		2.2 NA	ME		•
STREET ADDRESS	12 RUE LACOUR		2.3 ST	REET ADDRESS		
CITY-ST-ZIP	CANNES FRANCE 06400			TY-ST-ZIP		
TITLE	D	☐ DELETE	3.1 TIT			Change Addition
NAME	HUBBARD, LARA		3.2 NA			
STREET ADDRESS	12 RUE LACOUR			REET ADDRESS		
CITY-ST-ZIP TITLE	CANNES FR	DELETE	3.4. CI	TY-\$T-ZIP		Change Addition
NAME		L. Dittie	4. 2 NA			Onlings Addition
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP				Y-ST-71P		
TITLE		DELETE	5.1 TIT			☐ Change ☐ Addition
NAME			5.2 NA			
STREET ADDRESS				REET ADORESS		
CITY-ST-ZIP				Y-\$1-ZIP		
TITLE		DELETE	6.1 TIT			Change Addition
NAME			6.2 NA	ME		
STREET ADDRESS			6.3 ST	REET ADDRESS		j
CITY - ST - ZIP				Y-ST-ZIP		
14 i herehvir	certify that the information supplies	d with this filing does not qualit	fy for the exe	motion stated in	Section 119.07(3)(i), Florida Statutes. I further	certify that the information

indicated on this annual report or supplied with this filling does not quality for the exemption stated in Section 1.19.07(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:

April 20th 1998 +33:329.35