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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # 1, Corporation Name

L93116

(6)

FILED
Apr 27 1998 8:00am
Secretary of State

THE CO	ORPORAT	'E PLAN	ining Grou	JP, INC										
Principal Plac	e of Busines		*- *··	Mailing Ac	Idress								. Visii sibii 111 1	
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TAMPA FL-33611 TAMPA FL-33611											DO NOT WRI		SPACE	
U\$				US							Date Incorporated or Qualified	,		
2. Principal P	lace of Busin	nace		2a. Mailing	Address						07/25/1990 FEI Number			anlied For
			Ront Dr.			U I	19	\circ	- 1	4.				pplied For ot Applicable
Sulte Apt.	#. etc.	KONI Ur.	26 P.O. Box 490 Suite, Apt. #, etc.							59-3034476			Additional	
22 R	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			27						5.	Certificate of Status Desired		•	equired
Çity & State				City & State						6.	Election Campaign Financing		\$5.00	May Be
23 PING	LAND	<u>-</u>	28 PINELAND FL							Trust Fund Contribution			to Fees	
Zip		Coun	try	Zip		C	ountry			8.	This corporation owes or has	paid the cur	rrent year Inl	tangible
24 3394	15		E E	29 339	45	30	بحب	e			Personal Property Tax due Ju			□ No
	g, Name	and Add	ress of Current	Registered A	gent		- -			10.	Name and Address of New I	Registered	Agent	
	nnella, g		.YN				81	Name						
	181 N FL A	VE					82	Street	Addres	s (P.	O. Box Number is Not Accept	able)		
S-C							83				1807		•	
ហេ	TZ FL 3354	9					53							į
							84	City					85 Zip	Code
de Diversant	to the provisi	iono of Co	ations 607 8689	oud 607 1500	Clasida Platu	laa dha	2000.46			26.00	n a hasia this statement for the	FL	a l	la saciatara d
office or r	egi ste red ag	jent, or bo	th, in the State o	and 607, 1508 Florida, Such	, monda Siaiu i change was	authoriz	ed by	the corp	corpor	allon	n submits this statement for the coard of directors. I hereby acc	ept the app	oointment as	registered
agent. I a	ım f a miliar wi	ith, and ac	scept the obligati	ons of, Section	n 607. 0505 , FI	lorida SI	atutos	3 .						
SIGNATURE	Stoneture dynad	Lor reinlest na	ne of registered agent	acalitati il armolo alb	lo (N/O	IF Booiste	tod Ago	n' signatura	topuired	when	reinstating)	DATE		
12,	Cognition () ()		OFFICERS AND			13			- cqui bu		ADDITIONS/CHANGES TO OF		DIRECTOR	RS IN 12
TITLE	D				DELETE	1.1	TITLE					·	Change	Addition
NAME	CANNEL	LA, GWE	NDOLYN G			1.2	NAME							
STREET ADDRESS	2910 VIL	LA ROS	A PK.			1.3	STREET	ADORESS						
CITY-ST-ZIP	TAMPA I	FL				1.4	CITY-S	T-ZIP						
TITLE	_				DELETE	2.1	TITLE						Change	Addition
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STREET ADDRESS						2.3	STREET	ADDRESS						
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STREET ADDRESS								ADDRESS						
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NAME							NAME						,	
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CITY-ST-ZIP							CITY-51							
TITLE				·	DELETE		TITLE	-			· · · · · · · · · · · · · · · · · · ·		Change	Addition
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STREET ADDRESS						6.3	STREET.	ADDRESS						
CITY-ST-ZIP						6.4	C(1) Y - S1	T-ZIP						i
44 I hereby o	ortify that the	o informali	on equation with	this filma dos	e not qualify t	or the o	vemol	lion state	d in Co	olior	n 119 07/3\/ii\ Elorida Statutos	Lifurther or	artifu that the	information

nereby 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.

Meson also.

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