FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 1-15 -98



FILED Jan 15 1998 8:00am Secretary of State

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. -	Data da el Direce	-(D								
	Principal Place of Business 612 FLEMING ST. KEY WEST FL 33040			Mailing Address 612 FLEMING ST. KEY WEST FL 33040				DO NO1 WRITE	IN THIS SPACE	
20								 Date Incorporated or Qualified 08/21/1990 		
2	`	ce of Business	2a. Ma 26	iling Address	. A			4. FET Number 65-0266633	Proc 4 cm	plied For it Applicable
	Suite, Apt. #	, etc.	Sui	Suite, Apt. #, etc.				5. Certificate of Status Desired	□ \$8.75 / Fee Re	Additional equired
2	City & State		27 City	City & State				Election Campaign Financing Trust Fund Contribution	\$5.00	May Be
- = - 2	Zip	Country 25	29 Zip	-	Count	ry		This corporation owes or has pa Personal Property Tax due June	id the current year Int	· · · · · · · · · · · · · · · · · · ·
Ė		9, Name and Address of Curre DLONNA, MARK J				1 Name		10. Name and Address of New Re		
	office or repagent. I am	gistered agont, or both, in the State I familiar with, and accept the oblig	⊬of Horida S jations of, Se	iuch change was at ction 607.0505, Flor	s, the abouthorized rida Statut	by the corp es.	ooratio	ration submits this statement for the p n's board of directors. I hereby accep	ourpose of changing it of the appointment as	Code is registered registered
· ⊢	s 12.	Ignature, typed or printed name of registered ag OFFICERS AN			Hegistered /	sgoot s gnature	required	when reinstativig) ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIRECTOR	
-	TITLE NAME STREET ADDRESS	PT H AWKING JR, WILLIAM R 812 FLEMING STREET KEY WEST EL		<u>l⊒-tr</u> elete				No. 4 1 10 10 10 10 10 10 10 10 10 10 10 10 1	Change	Addit on
	CITY-ST-ZIP IITLE NAME STREET ADDRESS	COLONNA, MARK & 5. 612 FLEMING STREET KEY WEST FL		☐ DELFTE	2.1 THE 2.2 NAM 2.3 STRE	E Et address	P		Change	Addition
E Friedrich	CITY-ST-ZIP ITTLE NAME STREET ADDRESS	NET WEST TE	DELLTE		3.1 11110 3.2 NAM 3.3 STRE	2 4 CHY-ST-7IP 3.1 HTE 3.2 NAME 3.3 STREET ADDRESS			Change	Addition
	CITY-ST-ZIP RITLE VAME STREET ADDRESS		DELFTE		3.4 CHY-S1-ZIP 4.1 THE 4.2 NAME 4.3 STREEL ADDRESS		and a second		Change	Addilion
	CITY-ST-ZIP CITLE VAME STREET ADDRESS			DELFTE		ET ADORESS			Change	Addition
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request certify triat the information supplied with this tilting does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the informatio 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.