## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

NAME

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M64595

(5)

THE CELEBRITY CIRCLE, INC.

## FILED Mar 02 1998 8:00am Secretary of State

☐ Addition

) <sup>5</sup> '								
Principal Place of Business		Mailing Address	Mailing Address		T I INDIDAN NO BIRI DIADI DINE IDIBI DI	iif <b>uju</b> ii biuli bii	HE BEDE VIDI	II WIWII 1001
2001 PAN AM CIRCLE #212 TAMPA FL 33607		2001 PAN AM CIRCLE #212						
		TAMPA FL 33607	TAMPA FL 33607		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified			
					01/13/1988			
-	Place of Business	2a. Mailing Address			4. FEI Number		A	pplied For
21		26			59-2870084			ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc			5. Certificate of Status Desired		<b>.</b>	Additional
City & State		City & State		··	1	<del></del>	<del></del>	equired
23		28			6. Election Campaign Financing Trust Fund Contribution	П		May Be to Fees
Zip	Country	7(p)	Country		8. This corporation owes or has pa		<del></del>	
24	25		30		Personal Property Tax due June			No No
	g. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Re		ent	
G/	ARCIA, TONY		81 N	ame				
2001 PAN AM CIRCLE			<b>82</b> Si	treet Addre	ess (P.O. Box Number is Not Acceptal	ble)		
#212								
TAMPA FL 33607			63					
			84 C	ity			85 Zip	Code
				<u> </u>			· ·	
office or agent. I s SIGNATURE	registored agent, or both, in the State am familiar with, and accept the oblig signature, by ed or replied raine of registered as	gations of, Section 607.0505, Flor	ida Statutes.	· 	oration submits this statement for the pon's board of directors. I hereby acce		ntment as	registered
12.		VD DIRECTORS	Flegislated Agent sig	gnature required	ADDITIONS/CHANGES TO OFFIC	DATE CEDS AND D	NECTOE	DC IN 10
TITLE	PD	DELETE	1.1 TITLE	1	ADDITIONS/CHANGES TO OFFIC	JENS AND L	Change	Addition
NAME	GARCIA, ANTHONY					_		
STREET ADDRESS	2121 IVY ST.		1.3 STREET ADD	RESS				
CITY-ST-ZIP	TAMPA FL		1.4 CITY-ST-ZIF					
TITLE	V	DELETE	2.1 TITLE			L	Change	☐ Addition
NAME	GARCIA, ANTHONY J.	GARCIA, ANTHONY J. 22N						
STREET ADDRESS			2.3 STREET ADD	RESS				
CITY-ST-ZIP	TAMPA FL		2. 4 CITY-ST-20	P				
TITLE		☐ DELETE	3.1 TITLE				Change	Addition
NAME	]		3 2 NAME					
STREET ADDRESS			3.3 STREET ADD	ress				
CITY-S1-ZIP	<b></b>		3.4. CITY - \$T - ZI	P		<del></del>	<b>_</b>	
TITLE		☐ DELETE	4.1 TITLE			L	_ Change	☐ Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET ADD					
CITY-ST-ZIP	<b></b>	☐ DELF1€	4.4 CITY - ST - ZIF	P			7.65	12.00
TITLE NAME	-	ן שנונונ	5.1 TITLE			L	_ Change	Addition
STREET ADDRESS			5.2 NAME	200				
OTTY OF THE			53 STREET ADD	1				

61 TITLE

6.2 NAME

14. Thereby 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 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.

6.3 STREET ADDRESS