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

PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M66062

(4)

FILED								
Feb 27 1998 8:00am								
Secretary of State								

FLORIDA TROPICAL FISH, INC.									
Principal Place	o of Business	Mailing Address				41 610 11 511 11			
•		•							
509 SUNNY RD. 509 SUNNY RD.		500 SUNNY RD. 509 SUNNY RD.	500 SUNNY RD.						
LAKELANO FL			LAKELAND FL 33801-6614			DO NOT WRITE IN THIS SPACE			
US		US			3. Date Incorporated or Qualified				
					01/27/1988				
-	lace of Business	2a. Mailing Address			4. FEI Number		}	oplied For	
21 Colla Apl	# 44	Side And H. of			59-2860531	59-2860531 Not Applicable			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 A		
City & State	9	City & State	City & State						
23	•	28			6. Election Campaign Financing Trust Fund Contribution	П	\$5.00 Added t		
Zip	Country Zip Cou			ntry		aid the cur			
24	25	29	30	•	8. This corporation owes or has paid the current year Intancible Personal Property Tax due June 30. Yes No				
	g. Name and Address of Curren	l Registered Agent	. [10. Name and Address of New Re		Agent		
TEI	RRY, GEORGE E.			81 Name					
	SUNNY RD.		- 1	B2 Street Add	ress (P.O. Box Number is Not Accepta	blol			
	KELAND, FLL FL 33801		- 1	5treet Aud	ress (P.O. Box Number is Not Accepta	nei		1	
U-Vi	REDAID, FEETE 55001		t	83					
			1				T-11 2.		
			ļ	84 City		FL	85 Zip C	Code	
11, Pursuant office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State	2 and 607.1508, Florida Statut of Florida Such change was	es, the ab	ove-named corpora	poration submits this statement for the tion's board of directors. I hereby acce	purpose of pt the app	changing its	s registered registered	
agent. I a	m tamiliar with, and accept the obliga	alions of, Section 607.0505, Fl	orida Stati	utes.					
SIGNATURE	Signature typed or printed name of registered age	nt and tric if noole able (NOI	E Registered	Agent signature requi	red when reinstating)	DATE			
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFI		DIRECTOR	IS IN 12	
TITLE	PD	DELETE	1.1 117	LE			Change	☐ Addition	
NAME	TERRY, GEORGE E.		1.2 NA	ME				l.	
STREET ADDRESS	500 SUNNY RD.		1.3 STI	REET ADDRESS					
CITY-ST-ZIP	LAKELAND FL		1.4 CIT	Y-\$1-ZIP				ĺ	
TITLE	VD	DELETE	21 111	LE			Change	☐ Addition	
NAME	CAMPANO, FRANK F.		2.2 NA	ME				1	
STREET ADDRESS	5204 SCOTLAND PL		2.3 STF	HEET ADDRESS				ľ	
CITY-ST-ZIP	LAKELAND FL		2. 4 GF	TY-ST-ZIP					
TITLE	STD	☐ DELETE	3.1 TIT				Change	☐ Addition	
NAME	TERRY, LAURA D.		3.2 NA	ME				- [
STREET ADDRESS	500 SUNNY RD.		3.3 ST	REET ADDRESS	•			;	
CITY-ST-ZIP	LAKELAND FL		3.4. CI	IY-ST-ZIP				1	
TITLE		DELETE	4.1 117	LE			Change	Addition	
NAME			4. 2 N/	IME					
STREET ADDRESS			4.3 ST	REET ADDRESS				*	
CITY - ST - ZIP			4.4 CIT	Y-ST-ZIP					
TITLE		DELETE	5.1 TiT				Change	Addition	
NAME			5.2 NA	ME				ı	
STREET ADDRESS			5.3 ST	REET ADDRESS					
CITY-ST-ZIP			5.4 CIT	Y-ST-ZIP					
TITLE		☐ DELETE	6.1 TIT	LE			Change	Addition	
NAME			6.2 NA	ME [
STREET ADDRESS			6.3 STI	REET ADDRESS					
CITY-ST-ZIP			6.4 CI	Y-ST-ZIP					
14. I hereby o	certify that the information supplied w	th this filing does not qualify f	or the exe	mption stated in	Section 119.07(3)(i), Florida Statutes.	further ce	rtify that the	information	
officer or	on this annual report of supplementa director of the corporation or the rece or Block 13 if changed, or on an attai	liver or trustee empowered to	execute ti	i wat my signatt nis report as req	re shall have the same legal effect as uired by Chapter 607, Florida Statutes	and that i	ny name ap	pears in	