

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

0086340

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M73297 (7)
1. Corporation Name
COST CONTAINMENT CONSULTING SERVICE, INC.



Principal Place of Business

8910 N. DALE MABRY, SUITE 9
P.O. BOX 20128
TAMPA FL 33622-0128

Mailing Address

8910 N. DALE MABRY, SUITE 9
P.O. BOX 20128
TAMPA FL 33622-0128

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/23/1988

4. FEI Number

59-2879222

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒

Yes

☐

No

2. Principal Place of Business

21 4120 PINE LAKE LANE
Suite, Apt. #, etc.

22 #101

City & State

23 TAMPA, FLORIDA

24 33624

Country

25 Hillsborough

2a. Mailing Address

26 Post Office Box 20128
Suite, Apt. #, etc.

27

City & State

28 TAMPA, FLORIDA

29 33622-0128

Country

30 Hillsborough

9. Name and Address of Current Registered Agent

BALL, BERTHA
8910 NORTH DALE MABRY
EXECUTIVE CENTER, SUITE 9
TAMPA FL 33622-0128

10. Name and Address of New Registered Agent

81 Name

SAME (BERTHA BALL)

82 Street Address (P.O. Box Number is Not Acceptable)

4120 PINE LAKE LANE, #101

83

84 City

TAMPA

FL

85 Zip Code

33624

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE Bertha M. Ball, President Bertha M. Ball

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

8-03-98

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME BALL, BERTHA M.
STREET ADDRESS 8910 EXECUTIVE CTR. # 9
CITY-ST-ZIP TAMPA FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

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CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President
1.2 NAME Bertha M. Ball
1.3 STREET ADDRESS 4120 PINE LAKE LANE, #101
1.4 CITY-ST-ZIP TAMPA, FLORIDA 33624
☒ Change ☐ Addition
Address

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
☐ Change ☐ Addition

14. I hereby 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.

SIGNATURE Bertha M. Ball, President Bertha M. Ball 8-03-98 813-908-9608

CR2E034 (5/98)