FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

N97000003298 (3) DOCUMENT #

SMALL BUSINESS ADVISORY COUNCIL, INC.

FILED May 01 1998 8:00am Secretary of State

407 8695766

Principal Place of Business Mailing Address								I IBANINE DIA 1814 18811 BENIN BENIN DENN BENDU WIND	YOU UU	8) 10() 104)			
B41 DOUGLAS AVENUE				841 DOUGLAS AVENUE					3. Date Incorporated or Qualified				
SUITE 104			SU	SUITE 104					06/06/1997				
ALTAMONTE SPRINGS FL 32714			ALI	ALTAMONTE SPRINGS FL 32714					4. FEI Number	[Ann/	lied For		
									59-3498083		Applicable		
2. Principal Place of Business				2a. Mailing Address					6. Certificate of Status Desired 58.		ditional		
21			26	<u> </u>						e Req			
Suite, Apt. #, etc.			\vdash	Suite, Apt. #, etc.						00 ма			
22 City & State			27	City & State					Trust Fund Contribution				
23			28	28					7. Is this nonprofit corporation a homeowners associ	7. Is this nonprofit corporation a homeowners association?			
Zip	Country			Zip Country					8. This corporation owes or has paid the current year Intangible				
24	25			29 30					Personal Property Tax due June 30. Yes No				
9. Name and Address of Current Registered Agent									10. Name and Address of New Registered Agent				
						8	1	Name					
PIRES, JOE				ļ			2	Street Ad	ddress (P.O. Box Number is Not Acceptable)				
841 DOUGLAS AVENUE							3						
SUITE 104 ALTAMONTE SPRINGS FL 32714							_						
ALIAMONIE SPANOS PL 32/14							4	City	Ft 85	Zip Co	xde		
11. Pursuant	to the provis	ilons of Sections 617.050	2 and 6	17.1508. Florida St	atutes, t	he abo	ve-	named co	orporation submits this statement for the purpose of changi	ina lts i	registered		
OTHER OF	registered ac	gent, or both, in the State ith, and accept the obliga	Of Florid	ia. Such change w	vas autho	orized i	bv t	the corpor	pration's board of directors. I hereby accept the appointmen	nt as re	pereraigu		
SIGNATURE		ing and accept the being	2110110 01	, 00011011 017 .0000	,, i ionaa	Ciaioi							
SIGNATURE	Signature, typed	for printed name of registered age	nl and title	ff applicable ((NOTE: Reg	elstered A	gent	t signature rec	quited when reinstating) DATE				
12.	1 88 -	OFFICERS AN	D DIREC		_	13.			ADDITIONS/CHANGES TO OFFICERS AND DIREC				
TITLE	PD	IOE		☐ DELETE		1.1 TITLE		l	☐ Cha	n g e	Addition		
NAME	PIRES, JOE ADDRESS 841 DOUGLAS AVENUE STE 104				1.2 NAME								
STREET ADDRESS	ALTAMONTE SPRINGS FL 32714					1.3 STREET ADDRESS 1.4 City-St-Zip							
CITY-ST-ZIP TITLE	STD	MIL OF IMPOOTE OF	/ 14	☐ DELETE		2.1 TITLE		- 2112	☐ Cha	nne	Addition		
NAME	1	LAURA J				2.2 NAM				·90			
STREET ADDRESS				2.3 \$				DORESS					
CITY-ST-ZIP	ALTAMO	714	4 2.4			2. 4 CITY-ST-ZIP							
TITLE	D			DELETE		3.1 TITLE			☐ Cha	nge	Addition		
NAME						3.2 NAM	E						
STREET ADDRESS						3.3 STREET ADDRESS		DORESS			_		
CITY-ST-ZIP		INTE SPRINGS FL 32	714	□ on tig		3.4. CITY							
TITLE	1)E		4.1 TITLE		1	D Chai	nge (Addition		
NAME STREET ADDRESS	٠. ١					4. 2 NAM	_	ह	BHI Douglas Ave Ste. 104				
CITY-ST-ZIP					- 1	4.3 STRE		DURESS	PANSHEA BHI Douglas Ave Ste. 104 Adamoste Springs FL				
TITLE	 	······	ナー	DELETE		4.4 CITY- 5.1 TITLE		ZP	☐ Chai		Addition		
NAME						5.2 NAMI				.gv			
STREET ADDRESS	İ					5.3 STRE		DDRESS	•				
CITY-ST-ZIP						5.4 CITY							
TITLE				☐ DELETE		6.1 TITLE			☐ Char	nge	Addition		
NAME						6.2 NAMI	Ε						
STREET ADDRESS						6.3 STRE	ET AI	DORESS					
CITY ST-ZIP	<u> </u>					6.4 CITY	ST-	ZIP					
indicated	certify that th I on this annu	e information supplied wi lal report or supplementa	th this li	ing does not qualit report is true and	fy for the accurate	e exem e and (ptic hat	on stated i my signal	in Section 119.07(3)(i), Florida Statutes. I further certify that ature shall have the same legal effect as if made under oath	t the In 1: that I	formation I am an		
officer or Block 12	or Block 13 i	e corporation of the rec changed, of on an exact	liver of tr christiant v	rustee empowared with an address.	to exec	ute this	s re	port as re	in Section 119.07(3)(i), Florida Statutes. I further certify that ature shall have the same legal effect as if made under oath equired by Chapter 617, Florida Statutes; and that my name	appe	ars in		

Joe