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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

CLARK G.I.C., INC.

FILED May 13 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address	··· · · · · · · · · · · · · · · · · ·			IEL BIBIL BIBIL BIBIL BIBIL DIBEL BIBIL IDBI		
8182 MARYLAND 8182 MARYL ST. LOUIS MO 63105 ST. LOUIS MO					DO NOT WRIT	E IN THIS SPACE		
					3. Date Incorporated or Qualified	· · · · · · · · · · · · · · · · · · ·		
					03/03/1986			
2. Principal P	ace of Business	2s. Mailing Address			4. FEI Number	Applied For		
21		26			43-1294749	Not Applicat	ole	
Suite, Apt. #, etc.		Suite, Apt #, etc.			5. Certificate of Status Desired	\$8.75 Additional	\Box	
22		27		V. Certificate of Status Desired	Fee Required			
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be			
Zip Country		Zip Country		Trust Fund Contribution	Added to Fees			
24	a harma harma		30		,	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
24	9. Name and Address of Curren		[30]		10. Name and Address of New R		ᅥ	
CT	CORPORATION SYSTEM			81 Name	,			
1200 S. PINE ISLAND ROAD				44 4				
PLANTATION FL 33324				82 Street A	Address (P.O. Box Number is Not Acceptable)			
-				83			ヿ	
				24 0		1-1 - 0.4	႕	
				84 City		FL 85 Zip Code		
11. Pursuant	to the provisions of Sections 607 0502	2 and 607.1508, Florida Statu	ites, the al	ove-named	corporation submits this statement for the	purpose of changing its registere	ad	
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							1	
	Signature, typed or printed name of registered ager			Agent signature	required when reinstating)	DATE	_	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFI			
TITLE	AS LIGHER CHRISTINE	☐ DELETE	1,1 1(Change Additi	on	
NAME	HIGHES, CHRISTINE 8182 MARYLAND AVNUE		1.2 N					
STREET ADDRESS	CLAYTON MO			REET ADDRESS				
CITY-ST-ZIP TITLE	S	DELETE	1.4 CI 2.1 TI	TY-ST-ZIP	···	Charge Additi		
NAME	NOVELLY, P. A.		2.1 N			Charge C Room	·"	
STREET ADDRESS	8182 MARYLAND AVE.			REET ADDRESS		-	-	
CITY-ST-ZIP	ST. LOUIS MO			IY-ST-ZIP			-	
TITLE	VPT	☐ DELETE	3.1 11			Change Additi	ion	
NAME	HARK, JOHN L JR		3.2 N					
STREET ADDRESS	8182 MARYLAND AVENUE			REET ADDRESS			-	
City-St-29P	CLAYTON MO			TY-ST-ZIP				
TITLE	DP	☐ DELETE	4.1 11			Change Additi	ion	
NAME	NOVELLY, P. A.		4. 2 N	AME .			ŀ	
STREET ADDRESS	8182 MARYLAND AVE.		4.3 ST	REET ADDRESS			- [
CITY-ST-ZIP	ST. LOUIS MO		4.4 DI	ry-st-zip				
TITLE	AS	DELETE	5.1 Tr	LE		☐ Change ☐ Additi	ion	
NAME	LERCH, MICHAEL J.		5.2 N/	ME			- [
STREET ADDRESS	8182 MARYLAND AVE.		5.3 ST	REET ADDRESS			- [
CITY-ST-ZIP	ST. LOUIS MO		5.4 CI	TY-ST-ZIP				
TITLE		☐ DELETE	6.1 T II	LE T		Change Additi	on	
NAME			6.2 N/	ME [
STREET ADDRESS			6.3 ST	REET ADDRESS			- [
CITY-ST-ZIP			6.4 CF	Y-ST-ZIP			- 1	

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 supplieriental 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 of 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:

314 854-8532