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

PROFIT CORPORATION ANNUAL REPORT

1998

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

ROBERTS, ESMEALDA

8922 86TH ST.

LIVE OAK FL



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P26204

(8)

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R AND R PUBLICATIONS, INC.

FILED Mar 03 1998 8:00am Secretary of State

Change

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Principal Place of Business Mailing Address					ı realinat ilk olata aktra teril abili aktı akalı akalı akalı akalı akalı	MAIN MIRIL BANKL IN AL
8922 86TH ST. 8922 86TH ST. LIVE OAK FL 32060 LIVE OAK FL 32060 US US			060		DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified 09/26/1989	
	Place of Business	2a. Mailing Addre	2a, Mailing Address		4, FEI Number	Applied For
21		26			59-2968342	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, 4	Suite, Apt. #, etc.			3.75 Additional Fee Required
City & Stat	e	City & State	City & State		6. Election Campaign Financing \$	5.00 May Be
23		28				Added to Fees
Zip	Country	Zip	Cou	untry	8. This corporation owes or has paid the current y	ear Intangible
24			30		Personal Property Tax due June 30.  Yes  No	
g, Name and Address of Current Registered Agent					<ol> <li>Name and Address of New Registered Agent</li> </ol>	
ROBERTS, ROCKWELL W.				B1 Name		
8922 86TH ST. LIVE OAK FL 32060				82 Street Address (P.O. Box Number is Not Acceptable)		
				83		
				84 City	FL B5	Zip Code
onice or r	to the provisions of Sections 607.t egistered agent, or both, in the St m familiar with, and accept the ob	ale of Florida. Such chano	e was authorize	d by the corno	orporation submits this statement for the purpose of chan ration's board of directors. I hereby accept the appointment	ging its registered ant as registered
SIGNATURE	•					
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature in					equired when reinstating) DATE	
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRE	
TITLE	PD	☐ DEL	ETE 1.1 TI	TLE	☐ CI	hange 🔲 Addition
NAME ROBERTS, ROCKWELL W.			1.2 N	AME		
			1.3 \$7	TREET ADDRESS		
CITY-ST-ZIP	LIVE OAK FL			ITY-ST-ZIP		
TITLE	VS	☐ DEU	2.1 TI	TLE T	☐ CI	hange Addition
NAME			2.2 N/	AME		
STREET ADDRESS	8922 86TH ST.		2.3 ST	TREET ADDRESS		
CITY-ST-2IP	LIVE OAK FL		2.40	ITV. CT 7ID		!

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 trusted 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.

3.1 TITLE

3.2 NAME

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST- ZIP

4.4 CITY-ST-ZIP

3.4. CITY - \$1 - ZIP