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

PROFIT CORPORATION ANNUAL REPORT 1998 **DOCUMENT** #



Secretary of State DIVISION OF CORPORATIONS

(1)

FILED Mar 06 1998 8:00am Secretary of State

GARY '	TERRELL, INC.				
Principal Plac	e of Business	Mailing Address		- I FABRIMANI DIR FROM TORME OMBU IDIRA TOJU DIRAH R	BAI BABIT BIBIT BIBIT BABIT 1831
PO BOX 1137		PO BOX 1137			
WOODSTOCK GA 30188		WOODSTOCK GA 30188		DO NOT WOITE IN THE	0.004.05
				DO NOT WRITE IN THE 3. Date Incorporated or Qualified	S SPACE
				01/12/1990	
2. Principal P	lace of Business	2a. Mailing Address	· · · · · · · · · · · · · · · · · · ·	4. FEI Number	Applied For
21		26		58-1719165	Not Applicable
Suite, Apt. #, etc.		Suite, Apl. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		[27]		6. Certificate of Statos Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		[28]	Country	Trust Fund Contribution	Added to Fees
Z _I p 24	Country	Ziμ	Country	8. This corporation owes or has paid the o	current year Intangible
	25] 9. Name and Address of Curren		30	Personal Property Tax due June 30. 10. Name and Address of New Registers	
LH I	IRPHY, JOHN, ESQ.		81 Name		
4600 SHERIDAN STREET			20 0 111	(B) B N () N ()	
HOLLYWOOD FL 33021			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
,,,,	ALTITOOD 12 00021		83		
					leel 7 o .
			84 City	F	L 85 Zip Code
office or r agent La SIGNATURE	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		s, the above-named corporalitionized by the corporalida Statutes. Registered Agent signature requirements	coration submits this statement for the purpose tion's board of directors. I hereby accept the a	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PD	☐ DILETE	1.1 TITLE		☐ Change ☐ Addition
NAME	Steinhauer, Frank T.		1.2 NAME		
STREET ADDRESS	5686 DEKALB LANE		1.3 STREET ADDRESS		
CITY-ST-ZIP	NORCROSS GA		1.4 CITY-ST-ZIP		
TITLE	VST	i □ DETEJE	2.1 TITLE		☐ Change ☐ Addition
NAME	GRIGGS, JAMES		2 2 NAME		
STREET ADDRESS	408 BLUFF CREEK WAY		2 3 STREET ADDRESS		
CITY-ST-ZIP	WOODSTOCK GA		2 4 CITY - ST - ZIP		
TITLE	D DIGGE IAMES	DELETE	3 1 TITLE		Change Addition
NAME CIPCLI ADDRESS	GRIGGS, JAMES 408 BLUFF CREEK WAY		3 2 NAME		
STREET ADDRESS	WOODSTOCK GA		3.3 STREET ADDRESS		·
CITY-ST-ZIP TITLE	TOODSTOOK GA	DELETE	3.4 CBY-ST-ZIP 4.1 TITLE		Change Addition
NAME		<u></u>	4.1 TILE 4.2 NAME		
\$TREET ADORESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DETETE	5 1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP			5 4 CITY-ST-ZIP		
TITLE		DELETE	6 1 TITLE		Change Addition
NAME			62 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP			64 CITY-ST-ZIP		

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 truster empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if change I. or on an attachment with an address

1050 85 P OC 1