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FILED
Feb 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P36279** (8)

1. Corporation Name

PIQUINO MANAGEMENT CORPORATION

Principal Place of Business

**1509 ST. ANDREWS BLVD.
PANAMA CITY FL 32405**

Mailing Address

**1509 ST. ANDREWS BLVD.
PANAMA CITY FL 32405**



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/06/1991

4. FEI Number

92-0086738

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Trust Fund Contribution

☐

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 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

**LEE, EVERETT
1509 ST. ANDREWS BLVD.
PANAMA CITY FL 32405**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

[Signature]

(NOTE: Registered Agent signature required when reinstating)

2/04/98

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

**GM
HUENERS, JEFF
6613 BRAYTON DRIVE
ANCHORAGE AK 99507**

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

**D
BROWER, PRICE E
392 OGROOK STREET
BARROW AK 99723**

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

**SD
KRATZER, JAMES
6600 PLAZA DRIVE
NEW ORLEANS LA 70127-2584**

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

**D
CHRISTENSEN, JEANETTE
1230 AGVIK STREET
BARROW AK 99723**

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

**CD
BROWER, CHARLES DN
392 OGROOK STREET
BARROW AK 99723**

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP ☐ Change ☐ Addition

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:

[Signature]

907-267-2702

CP2E034 (10/97)