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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

101

FILED
Apr 15 1998 8:00am
Secretary of State

Principal Place 13654 NO 12 STE 4 TAMPA FL 33		Mailing Address 13654 NO 12TH ST STE 4 TAMPA FL 33613		DO NOT WRITE IN THI	
US	····	US		3. Date Incorporated or Qualified	
2 Principal F	Place of Business	2a. Mailing Address		09/14/1992 4. FEI Number	Applied For
Findipar Flace of Business		26		16-1421975	Not Applicabl
Suite, Apt #, etc.		Suite, Apt. #, etc	).	5. Certificate of Status Desired	\$8.75 Additional
01.00		27			Fee Required
City & Star	ie	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
ก	25	29	30	Personal Property Tax due June 30.	Yes No
	g. Name and Address of Curre	ent Registered Agent	81 Name	10. Name and Address of New Registers	ed Agent
11. Pursuant office or	to the provisions of Sections 607.05 registered agent, or both, in the Stal	502 and 607.1508, Florida Ste of Florida Such change	83  84 City  Statutes, the above-named cowas authorized by the corpor	prporation submits this statement for the purpose ration's board of directors. I hereby accept the a	85 Zip Code of changing its registered
SIGNATURE	Signature, typed or printed name of registered a				
2.	OFFICE DE A		(NOTE: Registered Agent signature req		<del></del>
TITLE	OFFICERS A	ND DIRECTORS	13.	ulred when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	<del></del>
AME	V RUANE, MARK	ND DIRECTORS	13. E 1.1 TITLE 1.2 NAME		ND DIRECTORS IN 12
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I nereby 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 frustee 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: