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

Mailing Address

757 HWY, 98 E.

DESTIN FL 32541

**PROFIT** CORPORATION ANNUAL REPORT

1998

Principal Place of Business

757 HWY, 98 E.

DESTIN FL 32541

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P92000001296 (2) DOCUMENT #

PASEK INVESTMENTS, INC.

3. Date Incorporated or Qualified 11/02/1992 2. Principal Place of Business 20. Mailing Address 4. FEI Number Applied For 59-3166270 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes □Ño 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BARTEL, RICHARD C 757 HWY 98E, 815- SUITE 15 Street Address (P.O. Box Number is Not Acceptable) **DESTIN FL 32541** 83 84 City 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, typed or printed name of registored against and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1 1 TITLE BARTEL, RICHARD C NAME 1.2 NAME 757 HWY 98E, #15 STREET ADDRESS 1.3 STREET ADDRESS DESTIN FL 32541 CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE BARTEL, KATHLEEN C NAME 2.2 NAME 757 HWY 98E, #15 STREET ADDRESS 2.3 STREET ADDRESS **DESTIN FL 32541** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition 4. 2 NAME NAME

14. Thereby certify that the information supplied with this filling 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 empowers 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 migrates.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

63 STREET ADDRESS

6.4 Crty-St-ZIP

5.4 CITY - ST - ZIP

4.4 CITY - ST - ZIP

5.1 TITLE

52 NAME

6 1 TITLE

62 NAME

DELETE

DELETE

SIGNATURE:

STREET ADORESS

STREET ADORESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

City-ST-7IP

TITLE

NAME

TITLE

NAME

850)654-5388

CRZEGG4

☐ Change

Change

Addition

Addition

**FILED** 

May 07 1998 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE