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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P92000003334 (9)

BURKLEY ENTERPRISES, INC.

FILED Apr 23 1998 8:00am Secretary of State

Principal Place of Business Mailing Address			(481/48) (15 JE113)(511 SE111 SE1	191 (88)		
11005 US 92 E B-213 SEFFNER FL 33584 US	PO BOX 75821 B-213 TAMPA FL 33675-821 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/02/1002			
2. Principal Place of Business	2a. Mailing Address			ed For		
21 3301 MCINTOSH RD.	26 NONE					
Sulte, Apt. #, etc.	Suite, Apt. #, etc.		5 Certificate of Status Desired Section 88.75 Add			
City & State 23 O V ER FL.	City & State					
Zip Country 24 33527 25 ////5802006H	⊢ ₁ ' ⊢ ┐	ountry				
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent			
BURKLEY, LAWRENCE W		81 Name	9			
333 N FALKENBURG RD B-213		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/03/1992 4. FEI Number 59-3148580 Not Applied For Set. 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent				
TAMPA FL 33875		83				
		84 City	FL 85 Zip Cod	de		
11. Pursuant to the provisions of Sections 607.050?	and 607 1508, Florida Statutes, the	above-name	d corporation submits this statement for the purpose of changing its re	egistered		

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. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature	required when reinstating) DATE		
12,	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	IS IN 12
TITLE	D DELET			Change	Additio
NAME	BURKLEY, LAWRENCE W	1.2 NAME			
STREET ADDRESS	333 N FALKENBURG RD #B-213	1.3 STREET ADDRESS	3301 MEINTOSH RD.		
CITY-ST-ZIP	TAMPA FL 33675	1.4 CITY-ST-ZIP	DOVER FL. 33527		
TITLE	DELET	TE 2.1 TITLE		☐ Change	Additio
NAME	·	2.2 NAME			
STREET ADDRESS		2.3 STREET ADDRESS			
CITY-ST-ZIP		2. 4 CITY-ST-ZIP			
TITLE	DELET			Change	Additio
NAME		3.2 NAME			
STREET ADDRESS		3.3 STREET ADDRESS			
CITY-ST-ZIP		3.4. CITY - ST - ZIP			
TITLE	DELE1	TÉ 4.1 TITLE		☐ Change	Addition
NAME		4. 2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS			
CITY-ST-ZIP		4.4 CITY-ST-ZIP			
TITLE	☐ DELET			Change	Addition
NAME		5.2 NAME			
STREET ADDRESS		5.3 STREET ADDRESS			
CITY-ST-ZIP		5.4 CITY-ST-ZIP			
TITLE	☐ DFLET			Change	Addition
NAME		6.2 NAME			
STREET ADDRESS		6.3 STREET ADDRESS			
CITY-ST-7IP		64 CITY-ST-7IP			

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.

4.44/6.60