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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 05 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9200006296 (7)

PANTH	er Homes, Inc.					
Principal Place of Business Mailing Address				<del></del> -		
1640 CPYRESS CREEK RD. 1640 CYPRESS CREEK RD. LUTZ FL 33549 US US			<b>D</b> .		DO NOT WRITE	E IN THIS SPACE
1					3. Date Incorporated or Qualified	
65-4-15	- 40				11/12/1992	
2. Principal P	lace of Business	2a. Mailing Address			4, FEI Number	Applied For
21   26     Suite, Apt. #, etc.   Suite, Apt. #, etc.					65-0371906	Not Applicable
27					5. Certificate of Status Desired	Fee Required
City & State City & State					6, Election Campaign Financing	\$5.00 May Be
28					Trust Fund Contribution	Added to Fees
L Zip	Country	Zip	Countr	У	8. This corporation owes or has pa	<b>—</b> · — ·
24	9. Name and Address of Curre		30		Personal Property Tax due June	
		nt Registered Agent	81	Name	10. Name and Address of New Re	gistered Agent
	ECO, FRANK J		L			
	2 NORTH 15TH STREET		82	Street Add	dress (P.O. Box Number is Not Acceptal	ole)
3	TE 200 MPA FL 33605		83			
	:: : : : : : : : : : : : : : : : : : :	• .	84	City		85 Zip Code
				1 - 7		FL
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						
12.	Signature, typed or printed name of registered age	ION DIRECTORS (NOTE	13.	ent signature requ	red when reinstating)  ADDITIONS/CHANGES TO OFFI	DATE
TITLE	P	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFI	Change Addition
NAME	l imra manaana		1.2 NAME			
STREET ADDRESS	1640 CPYRESS CREEK RD.		1.3 STREE	T ADDRESS		
CITY-ST-ZIP	LUTZ FL		1.4 C/TY-	4		
TITLE			2.1 THILE			Change Addition
NAME	2.		2.2 NAME			
STREET ADDRESS			2.3 STREE	T ADORESS		
CITY-ST-ZIP			2. 4 CITY -	S1-ZIP		
TITLE		☐ DELETE	3.1 TITLE			☐ Change ☐ Addition
NAME			3.2 NAME			;
STREET ADDRESS			3.3 STAEE	T ADDRESS		
CITY-ST-ZIP			3.4. CITY -	ST-ZIP		
TITLE			4.1 TeTLE			Change Addition
NAME			4. 2 NAME	1		·
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY-	ST - ZIP		Observe Addition
TITLE		DELETE	5.1 TITLE			Change Addition
NAME CTREET APPROVA			5.2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - 1 6.1 TITLE	SI-ZIP		Change Addition
NAME		- Offer	6.2 NAME			C. Onsige C. Avoliton
STREET AMORESS				T ADDRESS		

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 charged, one an attachment with an address.