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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATION :

1998 DOCUMENT # P92000013936 (9)

MARY ANN PEARSON, INC.

FILED
Apr 14 1998 8:00am
Secretary of State

2/20/99 (8/3/57)-1-3/3

| Principal Place of Business Mailing Address | | | | | a saktidot tila some stom pouti belitt dents ancon tinno nista tövbe susta dets sant | | |
|---|--|--|---------------------|---------------------------------------|--|---|---------|
| 3201 66TH STREET N. 10370 36TH WAY. N. A CLEARWATER FL 34622-5 ST. PETERSBURG FL 33710 US | | | | 197 | | DO NOT WRITE IN THIS SPACE | |
| US | UNG FE 33710 | US | | | | 3. Date Incorporated or Qualified | |
| | | | | | | 12/18/1992 | |
| 2. Principal Pl | ace of Business | 2a, Mailing Address | | | | 4. FEI Number Applied For | |
| 21 4930 Park Blvd. 26 | | | | | | 59-3156693 Not Applica | ble |
| Suite, Apt. | #, etc. | <u></u> ⊢¬ | Suite, Apl. #, etc. | | | 5. Certificate of Status Desired \$8.75 Additional | |
| 22 27 27 City & State C City & State | | | | | | Fee Required | |
| City & State City & State [28] | | | | | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees | |
| Zip Country Zip | | | Cou | intry | | This corporation owes or has paid the current year Intangible | |
| — ~~~ | | | 30 | 30 | | Personal Property Tax due June 30. Yes No | |
| | g, Name and Address of Current | | | <u> </u> | | 10. Name and Address of New Registered Agent | |
| EIS | enstadt, brian b | | | В1 | Name | | |
| | 49 STREET NORTH | | | 82 | Street Ad | Address (P.O. Box Number is Not Acceptable) | |
| | TE B-2 | | | | | | |
| ST. | PETERSBURG FL 33710 | | | 83 | | | |
| | | | | 84 | City | FL 85 Zip Code | |
| dd Durayant i | a the provisions of Castions 607 8600 | and CO7 1500 Florida State | ulos tho al | | namad o | corporation submits this statement for the purpose of changing its register | |
| office or re | egistered agent, or both, in the State on familiar with, and accept the obligation | of Florida. Such change was | authorized | d by | the corpo | poration's board of directors. I hereby accept the appointment as registered | j |
| Oldin Holle | Signature, typod or ported name of registered ages | | | d Age | nt signature re | required whori reinstating) DATE | |
| 12. | OFFICERS AND | DIRECTORS DELETE | 13. | 71.7 | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addit | tion |
| TITLE | D DEADON MADY A | □ nereut | | 1.1 TUTLE 1.2 NAME | | C CHange C Much | 1011 |
| NAME | PEARSON, MARY A DRESS 10370 36 WAY | | | | 4DD0000 | | |
| STREET ADDRESS | CLEARWATER FL 34622 | | | 1.3 STREET ADDRESS 1.4 City-St-Zip | | | |
| CITY-ST-ZIP TITLE | DELETE | | | 2.1 TiTLE | | Change Addi | tion |
| NAME | | | | 2.2 NAME | | | |
| STREET ADDRESS | | | 2.3 \$7 | 2.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | | | 2.4 C | ITY-S | T-ZIP | | |
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| STREET ADDRESS | | | 3 3 51 | THEET | ADDRESS | | |
| CITY-ST-ZIP | T Dittie | | | | T-ZIP | 01 | Lina |
| TALE | L) DELETE | | 4.1 10 | | | Ĺ] Change | IUII |
| NAME | | | 4. 2 N | | 1000ccc | | |
| STREET ADDRESS | | | | | ADDRESS | | |
| CITY+ST-ZIP TITLE | DELETE | | | 4.4 C(TY - ST - ZIP 5.1 TITLE | | Change Addit | tion |
| NAME | | | | 5.2 NAME | | | |
| STREET ADDRESS | | | | | ADDRESS | | |
| CITY+ST-ZiP | | | 5.4 CH | 1Y-S | T-ZIP | | |
| TITLE | DELETE | | 6.1 TI | 6.1 TITLE | | Change Addit | tion |
| NAME | | | 6.2 N/ | AME | | | |
| STREET ADDRESS | | | 6.3 S1 | IREE1 | ADDRESS | | |
| CITY-ST-ZIP | | | 6.4 CI | 1 Y - S | 1- ZIP | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| indicated of officer or of | on this engual report of supplemental | annual report is true and ac iver or trustee empowered to | curate and | d tha | at my sion: | d in Section 119.07(3)(i), Florida Statutes. I further certify that the informati- nature shall have the same legal effect as if made under oath; that I am an required by Chapter 607, Florida Statutes; and that my name appears in | un i |