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 #

P93000003312 (4)

BILL & SAM, INC.

FILED May 11 1998 8:00am Secretary of State



Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State City & State Country Country Country Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing Trust Fund Contribution Added to Fees Country Country State Country State Added to Fees Trust Fund Contribution owes or has paid the current year Intangible	Principal Place	of Business	Mailing Address				
Principal Place of Rusiness 2a Mailing Address 3ct 4ct 3ct 3ct 4ct 3ct				1710	DO NOT WRITE IN	THIS SPACE	
2. Maring Address 2. Maring Address 2. Maring Address 3. SUP JUNES IN 4. FE Number 5.9-3 (15898 Not Applicable 5.0 (15898 Not Applicable Not Applicable 5.0 (15898 Not Applicable 5.0 (15898 Not Applicable Not Applicable 5.0 (15898 Not Applicable Not App			-				
Supplementation Supplement	2. Principal Pla	ace of Business	2a. Mailing Address			Applied For	
Suite, April, etc. Suite, April, etc. Suite, Appil, etc. Suite, April, etc. Suite, April, etc. Suite, April, etc. Suite, April, etc. Suite, Appil, etc. Suite, A	21 3440	TAMPA RO	26 3504 OL	N KIUSTONEN)	7 59-3158986	Not Applicable	
28 PACIN MANUAL COUNTY 28 PAGE TO THE PROPERTY PARK TO THE P	Suite, Apt. I	∜, etc.	Suite, Apt. #, etc.		_		
Section Appendix Section (Section (Se	— n	4		PRINGS.FL			
10 Name and Address of Current Registered Agent	Zip	Country	Zip	Country	8. This corporation owes or has paid t	he current year Intangible	
MITHCELL, SYLVIA A SECTION SPECIAL SYLVIA A SECTION SYLVIA A SECTION SPECIAL SYLVIA A SECTIO	24 346	84 25 PINRUAS		30 PINANAS			
### STORES STUDY A SECRET STUDY A SECRET STUDY A SECRET STUDY STUD		_ 	Hegistered Ageny	81 Name	10. Name and Address of New Hegis	tered Agent	
3504 OLD KRHSTOURE LD. 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 agent 1 or the pitch of the component of the component as registered agent 1 or the females with, and accept the obligations of . Section 607 0506, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appealment as registered agent 1 or females with, and accept the obligations of . Section 607 0506, Florida Statutes, and the component of the component as registered agent 1 or females with, and accept the obligations of . Section 607 0506, Florida Statutes, and the component of the component as registered agent 1 or females with, and accept the obligations of . Section 607 0506, Florida Statutes, and the component of the component as registered agent 1 or females with, and accept the obligations of . Section 607 0506, Florida Statutes, and the component as registered agent 1 or females with, and accept the obligations of . Section 607 0506, Florida Statutes, the component as registered agent 1 or females with, and accept the obligations of section 607 0506, Florida Statutes, the component agent 1 or females agent 1 or females and the component agent 1 or females agent 1 o	MITICELL, STLVIA A				dress (P.O. Box Number is Not Acceptable)	,	
### City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607 6502 and 607 1508. Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered office or registered agont, or both, in the State of Florida Statules, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept the childpatters of Sections 607 6505. Florida Statules, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept the childpatters of Sections 607 6505. Florida Statules (Florida Statules)	STATE CONTROL TO STATE OF THE S					Au' .	
Addition TARPONS PRINGS FL D D DELETE 1. STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP DELETE DELETE 1. STREET ADDRESS CITY-ST-ZIP DELETE 3. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.2 LORD ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS AND DIRECTORS IN 1.2 LORD ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	2504 DID KRYSTONE RD.						
Addition TARPONS PRINGS FL D D DELETE 1. STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP DELETE DELETE 1. STREET ADDRESS CITY-ST-ZIP DELETE 3. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.2 LORD ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS AND DIRECTORS IN 1.2 LORD ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	-	TARPONI SORWES		FL 85 Zip Code			
12	office of registered agent, of both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered in						
TITLE	SIGNATURE Signature, typed or printed name of registered agent and title diapplicable (NOTE: Registered Agent signature required when reinstating) DATE						
NAME STREET ADDRESS 3504 OLD KEYSYTONE RD 1.3 STREET ADDRESS 1.4 CITY-ST-2P	12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12	
STREET ADDRESS 3504 OLD KEYSYTONE RD 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 1.4 CITY-ST-ZIP 1.4 CITY-ST-ZIP 1.5 STREET ADDRESS 1.5 STREET ADDRES	TITLE	_	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition	
TARPONS PRINGS FL	NAME			1.2 NAME			
DELETE D	STREET ADDRESS	*		1.3 STREET ADDRESS			
MITCHELL, SYLVIA A 3504 OLD KEYSTONE RD 23 SIREET ADDRESS 24 CITY-ST-ZIP TITLE DELETE 31 TITLE Change Addition A			DELETE			Change Addition	
STREET ADDRESS STAPPONS SPROJGS FL 23 STREET ADDRESS 2.4 CITY-ST-ZIP		•				The Charge The Vontion	
City-st-zip TARPONS SPROJGS FL							
TITLE DELETE 31 TITLE Change Addition NAME 32 NAME 32 NAME		Territoria de la companya de la comp					
NAME		Trail Office Of House 12	DELETE			Change Addition	
STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 3.4 CITY-ST-ZIP				3.2 NAME			
DELETE				3.3 STREET ADDRESS			
A.2 NAME	CITY-ST-ZIP			3.4. CITY-ST-ZIP			
STREET ADDRESS 4.4 CITY - ST - ZIP	TITLE		DELETE	4.1 TITLE		Change Addition	
CITY-ST-ZIP	NAME			4. 2 NAME			
TITLE DELÉTE 5.1 TITLE Change Addition NAME 5.2 NAME 5.2 NAME <td< th=""><th>STREET ADDRESS</th><th></th><th></th><th>4.3 STREET ADDRESS</th><th></th><th></th></td<>	STREET ADDRESS			4.3 STREET ADDRESS			
STREET ADDRESS 5.2 NAME 5.2 NAME 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.4 CITY-ST-ZIP 5.4 CITY-ST-ZIP 6.1 TITLE 6.1 TITLE 6.2 NAME 6.2 NAME 5.3 STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.5 CITY-ST-ZIP	CITY-ST-ZIP			4.4 CITY-ST-ZIP			
STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 5.4 CITY - ZIP	TITLE		L DELETE	5.1 TITLE		☐ Change ☐ Addition	
CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP	NAME			5.2 NAME			
TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP	STREET ADDRESS						
NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-SY-ZIP			DELETE			Change Addition	
STREET ADDRESS CITY-ST-ZIP 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	1		☐ DETE F			The Production	
CITY-ST-ZIP 6.4 CITY-SY-ZIP							
6.4 CITY-ST-ZIP 6.4 CITY-ST-ZI	· .						
	14. I hereby o	ertify that the information supplied with	this filing does not qualify		in Section 119.07(3)(i). Florida Statutes I furt	her certify that the information	

indicated on this annual report of supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am a 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.