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CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

P93000004077 (2) DOCUMENT #

FILED May 11 1998 8:00am Secretary of State

Principal Place of Business	CTING, INC.	Address		·					
2547 MERSCHEL STREET 2547 MERSCHEL STREET JACKBONVILLE FL 32204 JACKSONVILLE FL 32204					ľ				
						DO NOT WRITE IN THIS SPACE			
					- [3. Date Incorporated or Qualifie	d		
2. Principal Place of Business	2. Maiti	ng Address				01/19/1993 4. FEI Number		1 1	pplied For
2528 Park Street #		28 Park	Stre	et #1		59-3161126			lot Applicable
Suite, Apl. #, etc.		Apt. #, etc.		``	$\neg \uparrow$	6. Certificate of Status Desired			Additional
22 '	27					6. Certificate of Status Desired		Fee F	tequired
City & State Jacksonville, FL		& State	11-	T2.F		6. Election Campaign Financing			May Be
	28 Ja Zip	cksonvi	Coul			Trust Fund Contribution			to Fees
Zip Country 25 Country 26	29 32	204	30	nıy	İ	8. This corporation owes or has Personal Property Tax due Ju			ntangible No
P. Name and Address of Cu			1301			Io. Name and Address of New			
PURCELL, THOMAS K		·		81 Name					
-225 WATER STREET -SUITE -1235 -JACKSONVILLE FL-32202				1 5 83 84 City	48 1	(P.O. Box Number is Not Acceptancaster Terra			Code
11. Pursuant to the provisions of Soctions 607 office or registered agent, or both, in the 5	.0502 and 607.15	08. Florida Statu	tes, the ab	ove-named	corpora	onville Ition submits this statement for th		f changing	2210 its registered
office or registered agent, or both, in the S agent. I am familiar with, and accept the o	State of Florida, Su obligations of Sect	ich change was lion 607.0505. El	authorized Iorida Statu	l by the corp	poration	s board of directors. I hereby ac	cept the app	pointment as	s registered
agone variation with a society the a	Amgania ia ia, coo	1011 001 10000, 1							
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indicated on this antitual report or supplemental annous report is true and accurate and mat 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 trustog empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changer, or on an attachment with all address

(904) 387-4558