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

PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

May 06 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000013146 (4) TREASMART, INC.												
Principal Place of Business Mailing Address										1 18841081 119 10100 11711 90711 00111 10711 107	BR 14 <b>000</b> 11401 14 <b>0</b> 14 <b>8</b> %	
7	945 IDLEWIL	D LANE		7945 IDL	7945 IDLEWILD LANE							
L	ARGO FL 33	1777		LARGO F	LARGO FL 33777				1	DO NOT WRITE IN T	LIG COACE	
									<u> </u>	3. Date Incorporated or Qualified		
									'	02/19/1993		
	Principal P	ace of Busi	ness	2a, Mailin	2a, Mailing Address					4. FEI Number	LA	oplied For
21				26						59-3219006		ot Applicable
	Suite, Apt.	#, etc.		<b>}−</b> ¬	Suite, Apt. #, etc.					5. Certificate of Status Desired	4	Additional equired
22	City & State	<del></del>		27 City &	City & State					6. Election Campaign Financing	<del></del>	May Be
23	- •			28	<del>  -                                   </del>				'	Trust Fund Contribution		to Fees
	Zip		Country	Zip				ountry		B. This corporation owes or has paid th		tangible
24			25	29		30				Personal Property Tax due June 30.		] No
9. Name and Address of Current Registered Agent								Name	1	0. Name and Address of New Registe	red Agent	
TREASURE, WARREN 7945 IDLEWILD LANE							81 62				·,	
		RGO FL 33						Street A	Address	(P.O. Box Number is Not Acceptable)		- 1
	<b></b>	TOO I L OC	,,,,				83			······································		
								City			- 85 Zip	Code
							84	•			FL     `	i
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 regist 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 registe agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.											ls registered registered	
SIGNATURE Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered								ni signature r	required wh	en reinstating) D/	NTE	
12			OFFICE	RS AND DIRECTORS	D SELETE	13.				ADDITIONS/CHANGES TO OFFICERS		
TITI	ļ	DP	IDE WADDEN		☐ DELETE	1,1 10		ļ			Change	Addition
,	TREASURE, WARREN REET ADDRESS 7945 IDLEWILD LANE				1.2 NAME 1.3 Street A			ADDRESS				ļ
1	r-ST-ZIP		FL 33777			1.4 CI		- 1				Ì
TITI	<del></del>				☐ DELETE		2.1 TITLE				Change	Addition
NAI	ME .	TREASURE, ANNE			2.2 N			2.2 NAME				}
STR	EET ADDRESS		LEWILD LANE			2.3 \$1	IREET.	ADDRESS				
	Y-ST-ZIP	LARGO	FL 33777		Drieve.	2.40	_	T - ZIP				
TITI					DELETE	3.1 TI 3.2 N					Change	Addition
	EET ADDRESS							ADDRESS				ĺ
	Y-ST-ZIP			3.4.0							}	
TITL				, <del></del>	DELETE	4.1 TI					Change	Addition
NA	AE .					4.2 N	AME	•				
STR	EET ADDRESS					4.3 S1	TREET	ADDRESS				
	Y-ST-ZIP			<u> </u>	D property	4.4 CI		T- ZIP				4
TITL					∐ DELETE	5 1 T)					☐ Change	☐ Addition
NA/	eet address					5.2 N/ 5.3 S1		ADDRECC				1
	Y-ST-21P						STREET ADDRESS CITY-ST-ZIP					ŀ
	TITLE				DELETE	6.1 TITLE					Change	Addition
NAJ	NAME					6.2 N/	AME					ļ
STR	EET ADDRESS					6.3 S1	REET,	ADDRESS				
_	Y-ST-ZIP	-10. v		nigala artes et		6.4 CI				440.07/03/25		
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 supplicemental 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 or an attachment with an address.												atlam an L