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 # P93000014170 (3)

FILED May 11 1998 8:00am Secretary of State

CAR C	RAFT OF PINELLAS INC.							
Principal Plac	e of Business	Mailing Address				- I LDÖNINGS DEN SALED GATEL BALLI ABILI EDEDI (IEIL ALDAI IIEIL I	BBIG 48 IN 1885
1468 L & R INDUSTRIAL BLVD. 1468 L & R INDUSTRIAL BL								
TARPON SPRINGS FL 34689 TARPON SPRINGS FL 3468				19		DO NOT INDITE IN THE	¢ covec	
						DO NOT WRITE IN THI 3. Date incorporated or Qualified	3 SPACE	
						02/24/1993		
9 Principal P	Place of Business	2a. Mailing Address				4. FEI Number		Applied For
21	26							Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.								Additional
22						5. Certificate of Status Desired		berlupe
City & State City & State						6. Election Campaign Financing		0 May Be
23	28					Trust Fund Contribution		d to Fees
Zip	Country Zip		Cou	Country		8. This corporation owes or has paid the c		
24	25	29	30			Personal Property Tax due June 30.		☑ No
	9. Name and Address of Curr					10. Name and Address of New Registere	d Agent	
80)LEK, RICH			81	Name			
1992 B ONNIE CT.					Street Address	ess (P.O. Box Number is Not Acceptable)		
DUNNEDIN FL 34698				82	Direct Floring	(* .o. Box (*antion is feet recopiable)		
				83				
				-	0:4		Top I 7:	0.4
				84	City	F	L 85 Zip	Code
SIGNATURE	Signature, typed or ported name of registered a	agent and little if applicable (NO.ND DIRECTORS	OIE Registere	d Agent	signature require	ad when reinstaling) DATE ADDITIONS/CHANGES TO OFFICERS AF	ND DIRECTO	DRS IN 12
TITLE	P	DELETE	1.1 Ti	TLE		ADDITIONS/OTTAINED TO OTT TOLETO A	Change	
NAME	WALKA, PATRICIA G.	WALKA, PATRICIA G. 1.2		AMÉ			•	
STREET ADDRESS	742 LIGHTHOUSE DR.		13S	TREET AD	DORESS			
CITY-ST-ZIP	TARPON SPGS. FL			ITY-SI-	ì			Ì
TITLE		DELETE	2.1 Ti				Change	Addition
NAME			2.2 N/	AME				
STREET ADDRESS			2.3 \$	TREET AD	odress			ļ
CITY-ST-ZIP				ITY-ST-				
TITLE		DELETÉ	3.1 TI				Change	Addition
NAME			3.2 N/	AME	-			ļ
STREET ADDRESS			3.3 ST	TREET AD)DRESS			İ
CITY-ST-ZIP			3.4. C	ITY-ST-	ZIP			
TITLE		DELETE	4.1 T(TL€			Change	Addition
NAME			4.2 N	AME				
STREET ADDRESS			4.3 ST	TREET AD	DORESS			
CITY-ST-ZIP			4.4 CI	TY-ST-	ZIP			
TITLE		☐ DELETE	5.1 7/	TLE			Change	Addition
NAME			5.2 N/	AME				
STREET ADDRESS			5.3 \$1	IREET AD	DORESS			
CITY-ST-ZIP	·		5.4 CI	IY-SI-	ZIP			
TITLE		☐ DELETE	6111	TLE			Change	Addition
NAME			6.2 N/	AME				
STREET ADDRESS			6.3 \$1	IREET AD	DDRESS			
CITY-ST-ZIP			6.4 CI	11Y - ST - 2	ZIP			

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 changed, or on an attachment with an address.

\$12D30.8000

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