## 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 #

P93000016206 (3)

PC STATION, INC.

FILED
May 21 1998 8:00am
Secretary of State



		·			{		
Principal Place of Business Mailing Address							
6419 MANATEE AVENUE WEST Bradenton Fl. <b>3</b> 4209 US		6419 MANATEE AVENUE WEST Bradenton FL 34209 US					
					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					03/03/1993		
2. Principal Place of Business		2a. Mailing Address			4, FEI Number	<del></del>	Applied For
21		26 Suite Ant # ate		65-0391284	<del></del>	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	7	Additional Regulred	
City & State		City & State		6. Election Campaign Financing \$5.00 May Be			
23		28		Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Cour	ntry	8. This corporation owes or has paid	the current year I	ntangible
24	25	25 29 30			Personal Property Tax due June 30. Yes No		
	9. Name and Address of Curren	nt Registered Agent			10. Name and Address of New Reg	istered Agent	
00	BLE, JAMES M			B1 Name			ŀ
	3 72ND ST NW		ŀ	B2 Street Add	dress (P.O. Box Number is Not Acceptabl	a)	
	ADENTON FL 34209-2268					<u> </u>	
	- <del></del>			63			
			}	84 City		- 85 Zip	Code
						FL "	
11. Pursuant office or agent. Le	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obligi	02 and 607.1508, Florida Stat of Florida Such ch <mark>ange wa</mark> ations of, Section 607.0505,	lutes, the ab is authorized Florida Statu	ove-named cor by the corpora ites.	rporation submits this statement for the pu ation's board of directors. I hereby accep	rpose of changing, the appointment a	as registered
SIGNATURE						DATE	
12,	Signature, typod or printed name of registrated agr	ont and title if applicable IN  D DIRECTORS	13.	Agent signature root	uirod when reinstating)  ADDITIONS/CHANGES TO OFFICE		DRS IN 12
TITLE	D	DELETE	1.1 111	LE	TABBITION OF WATER OF STATE	☐ Change	
NAME	OGLE, JAMES M						]
STREET ADDRESS	\$13 72ND ST NW			REET ADDRESS			[8
CITY-ST-ZIP			1.4 CIT	Y-ST-ZIP			18
TITLE	D DELETE		2.1 TIT			Change	Addition
NAME	OGLE, PATRICIA A		2.2 NA	ME			
STREET ADDRESS	\$13 72ND ST NW		2.3 ST	REET ADDRESS			
CITY-ST-ZIP	BRADENTON FL		2. 4 Ci	TY-ST-ZIP			
TITLE		DELETE	3.1 T(T	LE		Change	Addition
NAME			3.2 NA	ME			
STREET ADDRESS			3.3 STI	REET ADDRESS			
CITY-ST-ZIP		<b>—</b>		TY-ST-ZIP		I a	1 2 2 2 2 2 2 2 2
TITLE		DELETE	4.1 TIT	1		Change	Addition
NAME			4. 2 N				
STREET ADDRESS				REET ADDRESS			
CITY - ST - ZIP		DELETE		Y-ST-ZIP		Change	Addition
TITLE	1		5.1 TIT			Vilange	,
NAME			5.2 NA	- 1			
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP		DELETE	5.4 C(1 6.1 T(1	Y-ST-ZIP		Change	Addition
TITLE		_ otter	6.2 NA				
NAME STREET ADDRESS				REET ADDRESS			
STREET ADDRESS							
CITY-ST-ZIP	and that the information supplied u	with this films doop not qualify		Y-ST-ZIP	in Section 119 07/3\(i) Florida Statutes L	orther certify that the	be information

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 truslee 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.

games M. Ogle

10 108 (OUI) 705-55