## PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## FILED

97 AUG 27 AM 10: 13

SECRETA IY OF STATE

DOCUMENT # P 9300002 8928 (8)				SECHTIA IY OF STATE TALLAHASSEE, FLORIDA		
1. Corporation Name					Martin in the country of the country of	
ANTON, INC.						
	₽ <del>T</del>					
Principal Place	. id-a	Mailing Address			7	
12505 BOYETTE RD.						
RIVERVIEW FL	<b>***</b>	RIVERVIEW FL 33569			DO NOT WHILE IN THE	OI NOL
,	· ·				3. Date Incorporated or Qualified 3a. D	ate of Last Report
					<u> </u>	
2. Principal Piec					59-3272370	Applied For Not Applicable
Suite Ant #	26   Suite, Apt. #, etc.					\$8.75 Additional
27					5. Certificate of Status Desired	Fee Required
City & State City & State					6. Election Campaign Financing	\$5.00 May Be
28					Trust Fund Contribution	Added to Fees
Zip 24	Country	Z <sub>1</sub> p	Country 30	у	This corporation owes or has paid the cu     Personal Property Tax due June 30.	rrent year Intengible
24]	9. Name and Address of Current		1301		10. Name and Address of New Registered	
PHA	M, ANTON		81	Name		
12505 BOYETTE RD. RIVERVIEW FL 33589			82	Street Add	ress (P.O. Box Number is Not Acceptable)	
				ļ <u>.</u>		
			83	•		
			84	City	FL	85 Zip Code
11. Pursuant to	the provisions of Sections 607.0502	and 607.1508. Florida Statute	es, the abov	e-named corr	poration submits this statement for the purpose of	changing its registered
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 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 registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE		ANTON T	PHAM		7 Oh 15	97
Sir	Ignature, typed or printed name of registered agent	and title if applicable (NOT)	Registered Ag	ent signature requi	red when reinstating) DATE	DIDECTORS IN 10
12.	OFFICERS AND DIRECTORS  DELETE				ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
NAME	PHAM, ANTON VIET CLUCK					
STREET ADDRESS 12505 Boyette Rd.			1.3 STREE	T ADDRESS		İ
CITY-ST-ZIP	River View FL 33569			ST-ZhP		
TITLE	_5	DELETE	2.1 TITLE			Change Addition
	PHAM ANTHONY VICTOR		2.2 NAME	3	800002275 -08/28/97-	-01075002
			2.3 STREE 2 4 CITY-	T ADDŘESS	****365.80	****365.00
TITLE	TIV-ST-ZIP RIVORUOW, FL 33569			51-215	1	☐ Change ☐ Addition
NAME PHAM, DON VAN,			3.1 TITLE 3.2 NAME			
·	12506 Boyette Ro	1.	3.3 STREE	T ADDRESS	•	
CITY-ST-ZIP	RIVER WIEW, FL	33569	3.4. CITY-	ST-ZIP		
ı iite -	V ′,	DELETE	4.1 TITLE			Change Addition
NUMBER OF THE PROPERTY OF THE	ひょんきょん コン・ブリッピン		4. 2 NAME			1
1.	PHAM ANTHONY	SON HAT		TADDRECC		}
STREET ADDRESS	194801 Boyette Kd	3547	4.3 STREE	t address St-zip		
STREET ADDRESS	PHAM ANTHONY RI 17980 Boyetle Rd LITHIA AL 3	3547 DELETE				☐ Change ☐ Addition
STREET ADDRESS CITY-ST-ZIP	PHAM ANTHONY RIGHTARD BOYETE RO LITHIA TA 3	<u> 3547</u>	4.3 STREE 4.4 City -	ST-ZIP		☐ Change ☐ Addition
STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS	PHAM ANTHONY 1998 Boyette Rd LITHIA AL 3	<u> 3547</u>	4.3 STREE 4.4 City- 5.1 Title 5.2 NAME	ST-ZIP		☐ Change ☐ Addition
STREET ADDRESS CHY-SI-ZIP TILE NAME STREET ADDRESS CHY-SI-ZIP	PHAM ANTHONY 174801 Boyetle Rd LITHIA AL 3	3547	4.3 STREE 4.4 CHY- 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CHY-	ST-ZIP		
STREET ADDRESS CHY-S1-ZIP THLE NAME STREET ADDRESS CHY-ST-ZIP THLE	PHAM ANTHONY RI 17420 Boyetle Rd LITHIA AL 3	<u> 3547</u>	4.3 STREE 4.4 CHTY-1 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CHTY-1 6.1 TITLE	ST-ZIP	4- 1	
STREET ADDRESS CHY-SI-ZIP THLE NAME STREET ADDRESS CHY-SI-ZIP THLE NAME	PHAM ANTHONY RI 1792 Boyetle Rd LITHIA AL 3	3547	4.4 CHY-1 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CHY- 6.1 TITLE 6.2 NAME	ST-ZIP  T ADDRESS ST-ZIP	5t 27	
STREET ADDRESS CHY-S1-ZIP THLE NAME STREET ADDRESS CHY-ST-ZIP THLE	PHAM ANTHONY 194801 Boyetle Rd LITHIA AL 3	3547	4.4 CHY-1 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CHY- 6.1 TITLE 6.2 NAME	ST-ZIP  T ADDRESS ST-ZIP  T ADDRESS	54-27	
STREET ADDRESS CHY-S1-ZIP THLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP TITLE NAME STREET ADDRESS CHY-ST-ZIP 14, I do hereby	certify that the information supplied indicated on this angular poor or su	DELETE  DELETE  with this filling does not qualify the properties around report letters.	4.3 STREE 4.4 CHY- 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CHY- 6.1 TITLE 6.2 NAME 6.3 STREE 6.4 CHY- 1y for the exx	T ADDRESS ST-ZIP  T ADDRESS ST-ZIP  T ADDRESS ST-ZIP  Emplion states	d in Section 119.07(3)(i), Florida Statutes. I furthe	Addition Addition
STREET ADDRESS CHY-SI-ZIP THLE NAME STREET ADDRESS CHY-SI-ZIP THLE NAME STREET ADDRESS CHY-SI-ZIP 14, I do hereby	certify that the information supplied indicated on this angular poor or su	DELETE  DELETE  with this filling does not qualify the properties around report letters.	4.3 STREE 4.4 CHY- 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CHY- 6.1 TITLE 6.2 NAME 6.3 STREE 6.4 CHY- 1y for the exx	T ADDRESS ST-ZIP  T ADDRESS ST-ZIP  T ADDRESS ST-ZIP  Emplion states		Addition Addition