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

PROFIT CORPORATION ANNUAL REPORT

1998

LUXEMBOURG

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

NAME Street address

TITLE

NAME

TITLE



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000029537 (6)

FEATHERSOUND CORPORATE CENTER II, INC.

Principal Place of Business Mailing Address					, 1951/1951 tile 18189 tillt 99/11 99/11 99/19 1818 1818 1819 1819 1		
1253 PARK ST CLEARWATER FL 34616 CLEARWATER FL 34616					DO NOT WRITE IN THIS	SPACE	
					3. Date Incorporated or Qualified 04/22/1993		
2. Principal Place of Business 2s. Mailing Address					4. FEI Number	Applied For	
26					59-2425076	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country 25	Ζφ 29	Countr 30	У	This corporation owes or has paid the cu Personal Property Tax due June 30.	rrent year Intangible	
	9. Name and Address of Current				10. Name and Address of New Registered	Agent	
WARD, R. CARLTON 1253 PARK ST CLEARWATER FL 34616			82	Street	Street Address (P.O. Box Number is Not Acceptable)		
			84		FL	85 Zip Code	
11. Pursuant office or r agent. I a	to the provisions of Sections 607,0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	and 607.1508, Florida Statute f Florida. Such change was a ons of, Section 607.0505, Flo	es, the abov uthorized b rida Statute	ve-named by the corp es	corporation submits this statement for the purpose opporation's board of directors. I hereby accept the approximation is a properly to the purpose of the pu	f changing its registered pointment as registered	
SIGNATURE							
	Signature typod or printed national registered agree			jont signature	required when reinstating) DATE		
12.	OFFICERS AND	DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	F WARD D.C	☐ bereit	1.2 NAME		Director	Change Addition	
NAME	WARD, R C						
STREET ADDRESS	1253 PARK ST		1.3 STREE	T ADDRESS			
CITY-ST-ZIP			1.4 CITY-	ST-ZIP	March at Control	T Observed to Large	
TITLE	I DINGON DO	☐ DELET E	2.1 TITLE		Assistant Secretary Change X	Change Addition	
NAME	RUXTON, D S		2.2 NAME		D, Rac Conc		
STREET ADDRESS			2.3 STREE	1 ADDRESS			
CITY-ST-ZIP	LUXEMBOURG	T or s	2. 4 CITY	-ST-ZIP	53 (4 - (-)		
TITLE	8	DELETE	3.1 TITLE		DiRector	Change Addition	
NAME	PALLOT, ROSEMARY		3.2 NAME				
OTDEET ANNOCCE	15 BOLLEVARO ROYAL 1,2440	,	2.2 CTOE	T ADDDECC	1		

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/synde and according 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 colored 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 exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(iii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(iii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(iii). Florida Statutes.

3.4. CITY-ST-ZIP

4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

4.1 TITLE

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

CNATURE (-//// CAPLION WARD

4/11/188 812 443 3281

Change

Change

Change

Addition

Addition

Addition

FILED

Apr 23 1998 8:00am

Secretary of State