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

FILED Jul 29 1998 8:00am Secretary of State

ļ	MENT # P93(DA CONTEMPO DESIGN	00050577 (4) I, INC.			 		
Principal Plac	ce of Business	Mailing Address				EHIN EDIAN BILLI IBI	
8915 N. FORK DRIVE 8915 N. FORK DRIVE			7		DO NOT WRITE IN TH	IIS SPACE	
İ					Date Incorporated or Qualified 07/14/1993		
-	Place of Business	2a. Mailing Address					oplied For
21	4 -1	[26]			65-0421439		
Suite, Apt:	#, 8 (C.	 			5. Certificate of Status Desired		
City & Stat	le	City & State			Election Campaign Financing		
23		28			Trust Fund Contribution		
Zip 24	Country 25	Zip 29	30		Personal Property Tax due June 30.	ine 30. 🔲 Yes 📝 No	
	g. Name and Address of C	current Registered Agent		 	10. Name and Address of New Register	ed Agent	
	IMAS, GERMAINE E		81	Name			
5358 ÇOLONY COURT			82	82 Street Address (P.O. Box Number is Not Acceptable)			
U.A	PE CORAL FL 33904-5819		63	<u> </u>			
			<u> </u>				
			184	4 City	F	EL 85 Zip	Code
11, Pursuant office or i agent. La	to the provisions of Sections 60 registered agent, or both, in the sm familiar with, and accept the	7.0502 and 607.1508, Florida Statut State of Florida. Such change was a obligations of, Section 607.0505, Florida	Mailing Address 8915 N. FORK DRIVE N. FT. MYERS FL 33917 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/14/1993 4. FEI Number 26 Suitc. Apt. #, etc. 27 City & State 28 Country 29 Country 8. This corporation owes or has paid the current year Intagribile Personal Property Tax due June 30. Yes No ent Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code 00 2 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered to of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered pations of, Section 607 6505, Figrida Statutes. Summer Country 10 Name and 607.1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered pations of, Section 607 6505, Figrida Statutes. Summer Country 10 Name Address of New Registered Pagent as registered pations of, Section 607 6505, Figrida Statutes. 11 Name Page No. No. Acceptable appointment as registered pations of, Section 607 6505, Figrida Statutes. 12 Name Page No. No. Page No. No. Page				
SIGNATURE	GERMAINE E. Signature. Typed or printed nume of register	DUMAS In discour and title it sophicable. INOTE			EDunas 7-23 vired whom (einstating) DAI	-98	
12.		RS AND DIRECTORS				AND DIRECTOR	3S IN 12
TITLE	PD	DELETE	1.1 TITLE			☐ Change	Addition :
NAME	DUMAS, GERMAINE E		1.2 NAME	1			
STREET ADDRESS	5358 COLONY CT		1)			\j
CITY-ST-ZIP TITLE	CAPE CORAL FL 33904	DELETE				Change	
NAME	DE MARCO, ROBERT	المال المال	•	1		C Change	
STREET ADDRESS	1496 CUMBERLAND CT.						
CITY-ST-ZIP	FT. MYERS FL 33919			1			
TITLE	SD	☐ DELFTE					
NAME	CHILTON, ROBERT		3 2 NAME				7
STREET ADDRESS	138 S.W. 52ND TERRAC	E	3.3 STREE	T ADDRESS			1
CITY-ST-ZIP	CAPE CORAL FL 33914	Louise				Channa	Addition
TITLE NAME		L.J DELETE				U Change	☐ ¥0dition
STREET ADDRESS			4	Y			1
CITY-ST-ZIP				l l			
TITLE		DELETE				Change	Addition
NAME .			5.2 NAME				ţ
STREET ADDRESS			5.3 STREE	T ADDRESS		,	
CITY-ST-ZIP			5.4 CITY-	ST-ZIP			
TITLE		☐ DELETE		-		□ Спапое	☐ Addition
NAME				77. 17	``````		Ĭ
STREET ADDRESS				17	and the second s		
CITY-ST-ZIP	ertify that the information suppl	lied with this filing does not qualify fo			Section 119 07(3)(i) Florida Statutes I furthe	r certify that the	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 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.

SIGNATURE: MEAMALIE SALMAN DERMAINE ENUMAS 7.2598 941-992599