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 # P93000051094 (9)

TRIPTOW ENTERPRISES, INC.

FILED
May 12 1998 8:00am
Secretary of State



Principal Place of Business Mailing Address							- I SAMINADO LIA DALADO NINI MORLI MORLI MANIN DOSON DINDA DIADI DALID SARIN BIDI (DAI			
•		<u> </u>								
15 BRENT LN SUITE 6252		15 Brent LN Suite 6252								
PENSACOLA FF 32503		PENSACOLA FF 32503			DO NOT WRITE IN THIS SPACE					
						3. Date incorporated or Qua 07/21/1993				
2. Principal Place of Business 2a. Mailing Address						4. FEI Number			Applied For	
21		⊢ ř	26			59-3195955		 	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			00 0 100000			Additional		
22		27			5. Certificate of Status Desire	ed 🔲		Required		
City & Stat	0	City & State			6 Floation Compaign Finan					
23		28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
Zip	TV : 15 - FTR - 15 - 17 - 17 - 17 - 17 - 17 - 17 - 17			intry		8. This corporation owes or			 	
24	25	29	30	•		Personal Property Tax du			∏ No	
	9. Name and Address of Curren		1901	T		10. Name and Address of N				
TRIPTOW, THOMAS L					Name					
	BRENT LN								, ,	
			82 Street Ad			dress (P.O. Box Number is Not Ac	ceptable)			
Suite 6252 Pensacola fl 32503				83					 	
PENSALULA FL 323U3				63						
				84	City		FL	85 Zip	o Code	
11. Pursuant	to the provisions of Sections 607.050	2 and 607, 1508, Florida Statut	es. the al	bove-	named cor	poration submits this statement for	or the purpose of	changing	its registered	
office or r agent. I a	egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida. Such change was a ations of, Section 607,0505, Flo	authorize orida Stat	d by t tutes.	the corpora	ition's board of directors. I hereby	accept the app	ointment a	is registered	
SIGNATURE	Signature, typed or printed name of registered age:		E D. J.			uired when reinstaling)				
12.	OFFICERS AND		13.	a Agen	signature requ	ADDITIONS/CHANGES TO	DATE OFFICERS AND	DIDECTO	ADC IN 12	
TITLE	D	DELETE	1.1 1/	Ti F		ADDITIONS/CHANGES TO	OFFICERS AND	Change		
NAME	TRIPTOW, THOMAS L							C) Charge	L Radiion	
STREET ADDRESS	15 BRENT LN SUITE 6252			1.2 NAME 1.3 STREET ADDRESS						
	PENSACOLA FL 32503									
CITY - ST - ZIP TITLE	VP	☐ DELETE	1.4 CITY-ST-ZIP DELETE 2.1 TITLE		· ZIP			Change	Addition	
	TRIPTOW, SHERRY L	Otter						∐ Change	Addition	
NAME	20200 ERIN POND RD			2.2 NAME						
STREET ADDRESS	SEMINOLE AL			2.3 STREET ADDRESS						
CITY+ST-ZIP	SEMINULE AL			2. 4 CITY-ST-ZIP		Proce-desident records				
TITLE		☐ DELETE						Change	Addition	
NAME			3.2 NAME							
STREET ADDRESS			3.3 STREET ADDRESS		.ddress					
CITY-ST-ZIP			3.4. C	ITY-ST	- ZIP					
TITLE		☐ DELETE	4.1 10	TLE				☐ Change	Addition	
NAME			4.2 N	AME						
STREET ADDRESS			4.3 ST	TREET A	DORESS					
CITY-ST-ZIP			4.4 CI	TY-ST-	· ZIP					
TITLE	•	DELETE	51717	TLE				Change	Addition	
NAME			5.2 NA	AME						
STREET ADDRESS			5.3 ST	REET A	DORESS					
CITY-ST-ZIP				TY-ST-						
TITLE		☐ DELETE	6.1 TII		- "			Change	Addition	
NAME			6.2 NA						_	
STREET ADDRESS					DDRESS					
					I					
CITY-ST-ZIP			6.4 CI	TY-\$1-	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.

IGNATURE Thomason to come Dings

2/28/00 224-944.2542

CR2E034 (10/97