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 # P93000051721 (7)

JAMES ULCHINSKY, INC

FILED Feb 25 1998 8:00am Secretary of State

Principal Plac	ce of Business	Mailing Address		r santenn sin talan tiligi deset døtir døtir døtir	maann bandu aandu albika albu abbu
		7542 DRACENA STREET			
PUNTA GORDA FL 33955		PUNTA GORDA FL 33955		DO NOT WRITE IN TH	IS SPACE
				3. Date Incorporated or Qualified	13 31 AOL
l				07/23/1993	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0426068	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6. Certificate of Status Desired	\$8.75 Additional
22		27		6. Certificate of Otatos Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28	Country	Trust Fund Contribution	Added to Fees
24	├ ──────────	Zip	Country	8. This corporation owes or has paid the	
241	25 9. Name and Address of Curre	29 ant Registered Agent	30	Personal Property Tax due June 30. 10. Name and Address of New Registere	X Yes No
DO.			81 Name	. ((,	n Agent
	OTH, JOSEPH E. CPA		JAV	mes ulchiusky	
8695 COLLEGE PARKWAY #305				ress (P.O. Box Number is Not Acceptable)	
	MYERS FL 33919		83	IN DIRECTOR ST.	
''	micho ic sobib				
			84 CityPu ~	the Govan F	85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statu	ries, the above-named coro	poration submits this statement for the nurnose	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 physiological for the purpose of section 607.0505, Florida Statutes.					
	X Vanue 1/1	gallogs of shedgall 607 50005, t	iona sialules.	1. 2	118/98
SIGNATURE	Signature upod or printed harne of registered as	a of and title if apply after (NC	Off Registered Agent signature requir	red when reinstating) DATE	1710/10
12.	OFFICERS AN	NO DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	PTD	DELLLE	1.1 TITLE		Change Addition
NAME	ULCHINSKY, JAMES		1.2 NAME		
STREET ADDRESS	7542 DRACENA ST.		1.3 STREET ADDRESS		
CITY-ST-ZIP	PUNTA GORDA FL		1.4 C(TY - ST - ZIP		
TITLE	SD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	ULCHINSKY, JEAN		2.2 NAME		
STREET ADDRESS	7542 DRACENA ST.		2.3 STREET ADDRESS		
CITY-ST-ZIP	PUNTA GORDA FL		2.4 CITY+ST-ZIP		
TITLE		DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		l
STREET ADORESS			3 3 STREET ADDRESS		j
CITY-ST-ZIP	<u> </u>	□ 8/07/	3.4. CITY-ST-ZIP		
TITLE		L_] DELETE	4 1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4 3 STREET ADDRESS		ļ
CITY-ST-ZIP		DELETE	4 4 CITY-ST-ZIP		Change T 4 2 2 2
TITLE		LJ DELETE	5 1 TITLE		Change Addition
NAME CIRCL ADDOCCO			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	Change Laddition
		□ ptrtit	61 TITLE		Change Addition
NAME CIDECT ADODGES			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - ST - ZIP			6.4 CITY+ST+ZIP		

14. Thereby 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 trusted 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.

James Ulching JAMES WICHWORD J 2/18/98 941-632-42