## 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 # P93000052630 (9)

SWEPT AWAY, INC.

· 人工行為人名 "在我们是我们是我们是我们的人,我们就是我们的人,我们就是我们的人,我们就是我们的人,我们就会会不是一种人,我们就会会会会会会,我们就会会会会

FILED Jan 15 1998 8:00am Secretary of State

Principal Place	e of Business	Mailing Address			11110 1501 <b>4 0</b> 5160 0155 E055 1005
13850 96TH TERR N SEMINOLE FL 33776-1422 US		13650 96TH TERR N SEMINOLE FL 34646 US		DO NOT WRITE IN THIS SPACE	
				<ol><li>Date Incorporated or Qualified 07/22/1993</li></ol>	
<del></del>	ace of Business	2a, Mailing Address		4. FEI Number	Applied for
21	<del></del>	26		59-3190858	Not Applicable
Suite, Apt.	#, <del>Q</del> (C.	Suite, Apt. #. etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6 Floring Compaign Fundament	
23	•	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	ر ساوس سافلنگ	Country	8. This corporation owes or has paid the d	
24	25	29 33776	30	Personal Property Tax due June 30.	Yes No
	g, Name and Address of Cur	ent Registered Agent		10. Name and Address of New Registere	d Agent
HAI	rrison, diane k		81 Namo		
13650 96TH TERRACE N			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
SEI	vinole fl <del>-34046</del> -				
			83		
			84 City		85 Zio Code
,		100 100714100 5		F	
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. Thereby accept the appointment as registered					
agent. Lam familiar with, and accept the obligations of, Section 607.0506, Florida Statutes.					
SIGNATURE	Signature, typod or printed name of registered	object and the design of the	Registered Agent signature requi	rred when renstating) DATE	
12.	<del></del>	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	P	☐ DELETE	11 HTLE		Change Addition
NAME	HARRISON, DIANE K		1.2 NAME		
STREET ADDRESS	13650 96TH TERR N		1.3 STREET ADDRESS		
CITY-ST-ZIP	<b>SEMINOLE FL</b>		1.4 C/TY - ST - 7/P		
TITLE	\$	DITELE	2.1 1(1)(6		Change Addition
NAME	DOTY, THOMAS J		2.2 NAME		
STREET ADDRESS	13650 96TH TERR N		2.3 STHEET ADDRESS		
CITY-ST-ZIP	SEMINOLE FL		2 4 CITY-ST-ZIP		
TITLE		DELFTE	3 1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	3.4 CITY-ST-ZIP		Change Addition
TITLE NAME		□ Ditte it	4.1 TITLE		Change Thyronton
STREET ADDRESS			4 2 NAME		
CITY-ST-ZIP			4.3 STREET ADDRESS		
TITLE		DELHE	4.4 C/TY-S1-ZIP 5.1 THE		Change Addition
NAME			5.2 NAME		g- L-1
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY- ST- ZIP		
TITLE		DELETE	61 INTE		Change Addition
NAME			6.2 NAME		\
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6 4 CHY-S1-7(P		
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1. I hereby certify that the information supplied with this firing 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 or an attachment with an address.

SIGNATURE.

Man & Harrison

1/6/98 815-596-5946