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 # P93000058427 (4)

SCOPE ENHANCER, INC.

FILED Apr 21 1998 8:00am Secretary of State

00012					
Principal Plac	e of Business	Mailing Address		14801790141014101044111100111708111001111701141011111	JEBUT IBAT IBAT
320 MAIN STREET		320 MAIN STREET		1	
AUBURNDALE FL 33923		AUBURNDALE FL 33823		DO NOT HIDITE BUTTURE COACE	
				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
				08/16/1993	
2. Principal P	lace of Business	2a. Mailing Address			Applied For
21		26) h	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		- \$8.75	Additional
27		27			Required
City & State		City & State		6. Election Campaign Financing \$5.0	O May Be
23		28		Trust Fund Contribution Adde	d to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible	
24	25	29 3	0]		□ No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent DOLON AC DONNIE D. 81 Name					
DOUGLAS, RONNIE R 320 MAIN STREET AUBURNDALE FL 33823					
			82 Street Addr	82 Street Address (P.O. Box Number is Not Acceptable)	
AU	BURNDALE FL 33823		83		
			84 City	FL 85 Zi	p Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the abo				poration 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 obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE					
SIGNATURE	Signature, typed or printee name of registered agent	and tille if applicable (NOTE: F	kig-stored Agent signature requir		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	
TITLE	D	☐ DELETE	11 TOLE	Change	e ∐ Addition
NAME	LUNDY, LARRY J		1.2 NAME		[]
STREET ADDRESS	720 HONEYCOMB LANE		1.3 STRFET ADDRESS		ļį
CITY-ST-ZIP	AUBURNDALE FL 33823	DELETE	1.4 C(TY - ST - Z(P 2.1 T(T),E	Change	Addition C
TITLE NAME	DOUGLAS, RONNIE R	f ptreit	2.2 NAME	Onange	, L. Audition
STREET ADDRESS	320 MAIN STREET		2.3 STREET ADDRESS		
CITY-ST-ZIP	AUBURNDALE FL 33823		2 4 CHTY-ST-ZIP		1
TITLE	ADDOTINDALE TE 00020	DELETE	3.1 117LE	Change	B Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY+ST-ZIP		
TITLE		DECETE	4.1 TITLE	Change	Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			44 CITY-ST-ZIP		
TITLE		DEFEIE	5.1 TITLE	Change	Addition
NAME			5.2 NAME		}
STREET ADDRESS			5.3 STREET ADDRESS		i
CITY-ST-ZIP	·	DICTE	5.4 CITY - ST - ZIP	Change	Addition
TITLE		DELETE	6.1 TITLE		LJ Addition
NAME			6.2 NAME		ļ
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f). 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 in source 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.

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4/14/98

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