## 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 # P93000061237 (2)

EISINGER PUBLICATIONS, INC.

## FILED May 01 1998 8:00am Secretary of State

Eiolita	EN PUBLICATIONS, INC.					I KRONDON DIO STIARA NIKILARANI ORANI ROKKI ROKKI ONION DIA		
	A-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1							
Principal Plac		-	Mailing Address					
4274 CONGREVE PLACE 4274 CONGREVE PLACE								
8ARASOTA FL 34241-6129 SARASOTA FL 34241-6129			29			DO NOT WRITE IN THIS SPA	DE .	
						3. Date Incorporated or Qualified		
						08/30/1993		]
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		pplied For
21	26					65-0433252		lot Applicable
Suite, Apt.	<b>├</b> 1					5. Certificate of Status Desired		Additional
22	27							Required
<u> </u>	City & State City & State							May Be
Zip	Country	Zip	Zip Coun			Trust Fund Contribution		to Fees
<u> </u>	— ·	<b>—</b>	30	unitry		8. This corporation owes or has paid the current Personal Property Tax due June 30.	-	ntangible
24	9. Name and Address of Curren	29 Agent	30	1		Personal Property Tax due June 30. You 10. Name and Address of New Registered Age		1100
EISINGER, LARRY 4274 CONGREVE PLACE								
SARASOTA FL 34241-8129				82	Street Addre	Address (P.O. Box Number is Not Acceptable)		
۰×	MOUIN FL 3424 1-0128			83				
				64	City	FL  *	Zip ا	Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607, 1508, Florida Statu	tes, the a	bove	-named corp		naina	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 obligations of, Section 607.0505, Florida Statutes.								
	m termilar with, and accept the obliga	ations or, Section our Jogs, F	IUriua ota	iuies.	•			1
SIGNATURE	Signature, typed or printed name of registered ago	int and title if applicable (NO	TE. Registers	d Agen	nl signature require	ed when reinstating) DATE		i,
12.	OFFICERS ANI	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DI	IECTO	RS IN 12
TITLE	D	DELETE 1.1 TI		ITLE			Change	Addition
NAME	EISINGER, LARRY		IAME		•		;	
STREET ADDRESS	4274 CONGREVE PLACE		1.3 STREE		NDDRESS			li li
CITY-ST-ZIP	SARASOTA FL 34241-6129		1.4 0	ITY-ST	- ZIP			
TITLE	D	☐ DELETE	211	ITLE			Change	Addition C
NAME	EISINGER, LARRY JR		2.2 NAME					]
STREET ADDRESS	4274 CONGREVE PLACE		2.3 STREET		NDDRESS .			ĺ
CITY-ST-ZIP	SARASOTA FL 34241-6129		2.4 CITY		r-ZIP			
TITLE	D	☐ DELETE	3.1 7	ITLE			Change	Addition
NAME	EISINGER, MAJ		3.2 NAME					
STREET ADDRESS	4274 CONGREVE PLACE		3.3 STREET		NODRESS			ļ
CITY-ST-ZIP	SARASOTA FL 34241-6129	-	3.4. CITY-		r-ZIP			
TITLE	D	☐ DELETE	4.1 T			LJ	Change	☐ Addition
NAME	HELEEN, BONNIE		4. 2 NAME					
STREET ADDRESS	4274 CONGREVE PLACE				NODRESS			1
CITY-ST-ZIP	SARASOTA FL 34241-6129		4.4 CITY - S		- ZIP			
TITLE		L DELETE	5.1 TITLE			f –	Change	L_ Addition
NAME			5.2 NAME					ļ
STREET ADDRESS					UDDRESS			-
CITY-ST-ZIP		T priere		ITY-ST	- ZIP		Cha	Addison
TITLE		DELETE	6.1 T			U	Change	☐ Addition
NAME			6.2 N					İ
STREET ADDRESS					ADDRESS			ļ
CITY-ST-ZIP	actifut that the information expertied up	th this filing does not coalify		MY-SI-		Section 119 07/3/(i) Florida Statutos I further certific	that th	o information
indicated	on this ennual report or supplied wi	it encu <del>ple</del> sport is true and so	curate en	d that	on blatou III i	Section 119.07(3)(i), Florida Statutes, I further certify a shall have the same legal effect as if made under	anath th	at Laman

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 receipt or tristee 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 attagnment with an address.

SIGNATURE:

to tomo

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