FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Apr 17 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000075629 (4)

EOWARD J. ULLMANN, JR., P.A.

Principal Plac	e of Business	Mailing Address			
	A BEACH RD SE	10911 BONETA BEACH	I RO SE		
STE 2063	100 Ft 04107 0040	STE 2063			DO NOT WRITE IN THIS SPACE
US US	ING\$ FL 34135-9048	BONITA SPRINGS FL	33923		3. Date Incorporated or Qualified
					10/25/1993
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number Applied For
21		26			65-0450452 Not Applicable
Sulte, Apt.	#. etc.	Suite, Apt. #, etc.			♦0.75
22		27			5. Certificate of Status Desired Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cou	intry	8. This corporation owes or has paid the current year Intangible
24	25	29	30		Personal Property Tax due June 30. Yes X No
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Registered Agent
PA	RRY, TIMOTHY R			81 Nar	ne
	D LAUREL OAK DR			82 Stre	eet Address (P.O. Box Number is Not Acceptable)
	E 400			300	sal Address (rg. bux number is not Acceptable)
	PLES FL 33963-2738			83	······································
110	# CEO 1 E 00300 E 100			<u> </u>	
				84 City	FL 85 Zip Code
SIGNATURE	am familiar with, and accept the oblining of registered as Signature, typod or printed nature of registered as	gent and title if applicable (NOTE: Registere		ature required when reinstating) DATE
12.		ND DIRECTORS DELETE	13.	71.5	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
	PST ULLMANN, EDWARD J JR	☐ Officit	1.1 TI		Citalize Ci Adultoti
NAME	10911 BONITA BEACH RD	PE #oneo	1.2 N		
STREET ADDRESS	BONITA SPRINGS FL	DE #2003		TREE1 ADDRE	SS
CITY-\$1-ZIP	BUNITA SPANOS PL	DELETE		TY-ST-ZIP	Change Addition
			2.1 (1)		C Change C Addition
NAME			2.2 N		
STREET ADDRESS				FREET ADDRE	58
CITY-ST-ZIP		DELETE		ITY-ST-ZIP	Change Addition
TITLE			3.1 TI		Cuarge C Addition
NAME			3.2 N		
STREET ADDRESS				REET ADDRE	SS
CITY-ST-ZIP		DELETE		ITY-ST-ZIP	Change Addition
TITLE		ן] טנונונ	4.1 10		Change
NAME	}		4.2 N		
STREET ADDRESS				REET ADDRE	58.
CITY-ST-ZIP		The second		TY-ST-ZIP	
TITLE		☐ DELETE	5.1 TI		Change Addition
NAME			52 N		
STREET ADDRESS				REET ADDRE	SS
CITY-ST-ZIP				TY-ST-ZIP	
TITLE		DELETE	6.1 TI	TLE	☐ Change ☐ Addition
NAME			6.2 N	ME	
STREET ADDRESS			6.3 \$1	REET ADDRE	SS
CITY-ST-ZIP			640	TY-ST-7IP	

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 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.