## 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

## **FILED** Feb 10 1998 8:00am Secretary of State

1. Corporatio	n Name	# P9300 TRACTING SERV	10076333 110es, Inc.	3 (2)				
Principal Plac	e of Busines	35	Mailing Addre	Mailing Address 3211 PLEAŜANT LAKE DR. TAMPA FL 33618			L 1884 1881 110 1818 1811 1811 1811 1811	
3211 PLEASA TAMPA FL 33							DO NOT WRITE IN THIS SPACE	
							3. Date Incorporated or Qualified	$\neg$
		·				<del></del>	11/01/1993	
2. Principal Place of Business			2a. Mailing Ac	idress			4, FEI Number Applied Fo	
Suite, Apt. #, etc.			<del></del>	Suite, Apt. #, etc.			SR 75 Additions	
22			27				5. Certificate of Status Desired Fee Required	·
City & Stat	10		— ·	City & State			6. Election Campaign Financing \$5.00 May Be	
Zip Country				Zip Country			Trust Fund Contribution Added to Fees	$\dashv$
24	Zip Country		29	2ip 29 30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
	9. Name and Address of Curre						10. Name and Address of New Registered Agent	$\dashv$
YAI	NEZ, ARMA	NDO 1			81	Name		
3211 PLEASANT LAKE DR. TAMPA FL 33618					82	Street Add	dress (P.Q. Box Number is Not Acceptable)	
						·		
•					83			
•					84	City	FL 85 Zip Code	
office or r agent. I a SIGNATURE	ım familiar w	pent, or both, in the Sta ith, and accept the obl	igations of, Section 60	07.0505, Flo	orida Statutes	3.	rporation submits this statement for the purpose of changing its registeration's board of directors. I hereby accept the appointment as registers used when reinstating)  DATE	 q
12.			ND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD DELETE			DELETE	1,1 TITLE		☐ Change ☐ Add	ition
NAME		ARMANDO J		1.2 NAME		ľ		l
STREET ADDRESS		EASANT LAKE DR.		1.3		ADDRESS		
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TITLE NAME			ب	DELETE	ETE 2.1 TITLE 2.2 NAME		[_] Change	HOII
STREET ADDRESS						ADDRESS		Į
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STREET ADDRESS					33 STREET	ADDRESS		
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NAME					5.2 NAME		6 20	$ \mathscr{L} $
STREET ADDRESS					5.3 STREET	ADDRESS	8761	۱ '
CITY-ST-ZIP					5.4 CITY - S	T- 7IP		
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NAME					6.2 NAME		-02/10/98~-01043026	
STREET ADDRESS					6.3 STREET		***150.00	
CITY-ST-ZiP	ertify that th	e information supplied	with this filing does no	al quality to	64 CITY-S		Section 119.07(3)(i) Florida Statutes I further certify that the informati	

I nereby certify that the information supplied with this filing does not quality for the exemption stated in Section 1.19.07(3)(j). Florida Statutes. Further certify that the informatic indicated on this annual report or supplied with 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.

No.