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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000078721 (6)

COLINTERRY ENTERPRISES, INC.

FILED Mar 04 1998 8:00am Secretary of State



Suite, Apt. City & State 23	ST. N. 843 lace of Business SAME #, atc. SAME	Suite, Apt. #, etc. 27 SAM City & State	16	DO NOT WRITE IN TO 3. Date Incorporated or Qualified 11/15/1993 4. FEI Number 59-3211942 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution	Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees
Zip 33'	773 25 Country S,		Country U.S.	This corporation owes or has paid the Personal Property Tax due June 30. Name and Address of New Register	Yes No
135 CL	WLEY, COLIN 59 RANCHWOOD DR EARWATER FL 34824 to the provisions of Sections 607 056 egistered agent, or both, in the State	02 and 607 1508, Florida Statute n of Florida, Such change Mesa	83 SA 64 City 5	ress (P.O. Box Number is Not Acceptable) Provided the statement for the purportion's board of directors. I hereby accept the	FL 85 Zip Code 33764 se of changing its registered appointment as registered
SIGNATURE	Signalure, typed or printed name of registered by	•	Figure Statutes.		273 8
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1,1 TITLE		Change Addition
NAME	BEWLEY, COLIN		1,2 NAME		
STREET ADDRESS	1359 RANCHWWOD DR.		1.3 STREET ADDRESS		
CITY-ST-ZIP	CLEARWATER FL		1.4 CITY-ST-ZIP		
TITLE	VP	DELETÉ	2.1 TITLE		☐ Change ☐ Addition
NAME	BEWLEY, COLIN		2.2 NAME		
STREET ADDRESS	1359 RANCHWOOD DR		2.3 STREET ADDRESS		
CITY-ST-ZIP	CLEARWATR FL		2.4 CITY-ST-ZIP		
TITLE		DELETE	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			4.1 TITLE		CHANGE IN MORROR
NAME OTOGET LEDDES OF			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME		C percer	5.2 NAME		and other than the state of the
STREET ADDRESS			•	-	
			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
NAME		LJ beccir	6.2 NAME		The second of the control of
					•
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	positive that the information avacating w	the this files does not evalify to	6.4 CITY-ST-ZIP	Castion 110 07/21/3) Florida Statutos I furthe	ar cortify that the information

pplemental 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 or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in on an attachment with an address.

SIGNATURE:

COLF. BUS COLIN F. BOWLEY 2-27-98