| *** | | | | | |
|--|---|---|---|---|---|
| FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 | | | | FILED | |
| COR | PROFIT RPORATION | | EPARTMENT OF STATE | Apr 08 19 | 998 8:00am |
| | JAL REPORT 1998 | 7.5/ | oretary of State OF CORPORATIONS | Secreta | ry of State |
| DOCUI 1. Corporation | MENT # P93000 | 0079219 (| O) | | |
| CLUB 1 | 00 INC. | | | | . 46111 1611 6 1411 0 11041 11116 1511 1511 |
| Principal Place | e of Business | Mailing Address | | | |
| 802-S-MAGDI | HAVE NO Longer | 803 G. MAGDILL AV | E | | |
| 130 130 TAMPA FL 33609 TAMPA FL 33609 | | | | DO NOT WRITE IN THIS SPACE | |
| US | | US | | 3. Date Incorporated or Qualified 11/12/1993 | |
| 2. Principal P | lace of Business | 2a. Mailing Address | | 4. FEI Number | Applied For |
| 21 39 1 Suite, Apt | w. waters Av. | 26 39 (I ω . Suite, Apt. #, etc | waters Av. | 59-3208981 | Not Applicable \$8.75 Additional |
| | O | 27 Suite | 10 | Certificate of Status Desired | Fee Required |
| City & State | | City & State | 71. | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| Zip | Country | 1 Zip 33614 | Country 30 Hillsborou | 8. This corporation owes or has pai | |
| 24 356 | 9. Name and Address of Curre | | 30 411300700 | Personal Property Tax due June 10. Name and Address of New Reg | |
| | PEZ, CLARA I | | 81 Name | | |
| 993 130 | -S. MACDILL-AVE: | | 62 Street Ad | dress (P.O. Box Number is Not Acceptab | e) |
| | , MPA FL 33609 | | 63 | | |
| | | | 84 City | · · · · · · · · · · · · · · · · · · · | FL 85 Zip Code |
| 11. Pursuant office or r | to the provisions of Sections 607.05 registered agent, or both, in the Statum familiar with, and accept the oblig | 02 and 607,1508, Florida 5 e of Florida, Such change | Statules, the above-named co was authorized by the corpor | orporation submits this statement for the pration's board of directors. I hereby accept | |
| SIGNATURE | | | | | |
| 12. | Signature, typed or printed name of registered as OFFICERS AN | gent and title if applicable ND DIRECTORS | (NOTE: Registered Agent signature rec | quired when rainstating) ADDITIONS/CHANGES TO OFFIC | ERS AND DIRECTORS IN 12 |
| TITLE | D | DELET | | | Change Addition |
| NAME STREET ADDRESS | LOPEZ, CLARA I | | 1.2 NAME 1.3 STREET ADDRESS | | |
| CITY-ST-ZIP | TAMPA FL | | 1.4 CITY-ST-ZIP | | |
| TITLE | Owner Clara | DELET | | | Change Addition |
| NAME STREET ADDRESS | Lopez, Clared 1 3911 W waters AV | #10 | 2.2 NAME 2.3 STREET ADDRESS | | |
| CITY-ST-ZIP | TAMPA 71. 33614 | - | 2 4 CITY-ST-ZIP | , | |
| TITLE | | DELET | E 3.1 TITLE 3.2 NAME | | Change Addition |
| NAME STREET ADDRESS | | | 3.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | - India | 3.4. CITY - ST - ZIP | | Change Addition |
| NAME | | [_] DELET | 4.1 TITLE 4.2 NAME | | Change Addition |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | DELET | 4.4 CITY-ST-ZIP E 5.1 TITLE | | Change Addition |
| NAME | | | 5.2 NAME | | - · · · · - |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | |
| CITY-ST-ZIP TITLE | | DELET | 5.4 CITY-ST-ZIP E 6.1 TITLE | | Change Addition |
| NAME | | | 6.2 NAME | | |
| STREET ADDRESS | | _ | 6.3 STREET ADDRESS | | |
| CITY-ST-ZIP | certify that the information supplied | with this july does not qu | 6.4 CITY-ST-ZIP alify or the exemption stated | in Section 119.07(3)(i), Florida Statutes. I | further certify that the information |
| indicated officer or | on this annual report or supplement director of the corporation or the re- | ital annual report is true an ceiver or fustee ampower | o accurate and that my signa of to execute this report as re | in Section 19.07(3)(i), Florida Statutes stature shall have the same legal effect as if equired by Chapter 607, Florida Statutes; | made under bath; that I am an and that my name appears in |
| _ | | i (Will an addross | A . | 4/2/98 (81 | 3)931.4191 |
| LAMOID | ロロRト・レノー・メクーデー | • | /Y 1 | 11-110 (0) | · / · / · · · · · · · · · · · · · · · · |