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CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P93000079919 (5)

FILED Mar 30 1998 8:00am Secretary of State

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2. Principal Piece of Business 2. Ambient Address 4. FEI Number 59-38208266 Not Applicable Suffer Add Rept 59-38208266 Not Applicable Suffer Additional Suffer April 4, etc. 2. Su							3. Date Incorporated or Qualified			
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Suite. Apt. 4, etc. Suite. Suite.	2. Principal P	lace of Business	2a. Mailing Address					A	pplied For	
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City & State Ci	Suite, Apt.	#, etc.	Suite, Apt. #, etc.					\$8.75	Additional	
Zip	22						5. Commode of Oldido Dosned	Fee A	equired	
Zip Country Zip Country Zip Country St. This corporation owes or has paid the current year Intemptible St. Name and Address of Current Registered Agent 10, Name and Address of New Registered Agen		0	⊢ ′							
Section Sect										
WOJAC, DONNA G 400 BANKES BLVD. ROCKLEDGE FL 32955 84 City FL 95 Zip Code 11. Pursuant to the provisions of Sections 607 0542 and 607 1508, Florida Statutes 85 Street Address (P.C. Box Number is Not Acceptable) 87 Street Address (P.C. Box Number is Not Acceptable) 88 Street Address (P.C. Box Number is Not Acceptable) 89 City FL 95 Zip Code 11. Pursuant to the provisions of Sections 607 0542 and 607 1508, Florida Statutes 89 Street Address (P.C. Box Number is Not Acceptable) 80 City FL 95 Zip Code 11. Pursuant to the provisions of Sections 607 0542 and 607 1508, Florida Statutes 80 City Street Address (P.C. Box Number is Not Acceptable) 81 City FL 95 Zip Code 82 Zip Code 83 Zip Code 84 City FL 95 Zip Code 85 Zip Code 85 Zip Code 86 City 85 Zip Code 86 City 85 Zip Code 86 City 85 Zip Code 87 Zip Code 86 City 85 Zip Code 87 Zip Code 88 Zip Code 88 Zip Code 89 Zip Code 89 Zip Code 80 Zip Code 8	_ `	<u> </u>	<u></u>		intry		,			
WOJAC, DONNA G 480 BARNES BLVD. ROCKLEDGE FL 32955 11. Pursuant to the provisions of Sockons 607-0502 and 607, 1508, Florida Statutes, the average of provisions of Sockons 607-0502 and 607, 1508, Florida Statutes, the outproteion's board of directors. I hereby accept the appointment as registered agent, or both in the State of Florida. Such change was authorized by the 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 separate and territorial with, and accept the obligators of, Section 607, 6505, Florida Statutes. SIGNATURE 12. OF Florida Statutes OCFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TINLE OFFICERS AND DIRECTORS IN 12 LOWIS TARREST ADDRESS CITY 51-79 TINLE OCKLEDGE FL 32955 LA CITY 51-79 TINLE ORACKLEDGE FL 32955 LA CITY 51-79 TINLE OFFICERS AND DIRECTORS IN 12 22 NAME 23 STREET ADDRESS CITY 51-79 TINLE OFFICERS AND DIRECTORS IN 12 21 TINLE 22 NAME 23 STREET ADDRESS CITY 51-79 TINLE OFFICERS AND DIRECTORS IN 12 TINLE OFFICERS AND DIRECTORS IN 12 Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Addition TINLE OFFICERS AND DIRECTORS IN 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 LA CITY 51-79 TINLE OFFICERS AND DIRECTORS IN 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Addition AND ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 LA CITY 51-79 TINLE OFFICERS AND DIRECTORS IN 12 ADDITIONS/CHANGES TO OFFICERS AND DIRE	24			30						
## COUNTY CARD BLYD. ## ROCKLEDGE FL 32955 ## City FL 85 Zip Code ## City FL 85			vedistaten währtt		81	Name	10. Maine and Address of New Registered	Agent		
ROCKLEDGE FL 32955 ### City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607 0542 and 607 1568, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or hoch, in the State of Florida, Such change was early originated by the corporation's board of directors. Thereby accept the approximant as registered agent and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 10. OFFICER SAND DIRECTORS 11. STREET ADDRESS CITY-S1-7P WOJAC, DONNA G 480 BARNES BYLD. 1. STREET ADDRESS CITY-S1-7P DELETE 1. LOTY-S1-7P 1. DELETE 1. LOTY-S1-7P 1					["					
Section Sect					82	Street Add	dress (P.O. Box Number is Not Acceptable)			
11. Pursuant to the provisions of Socions 607 0502 and 607 1508, Florida Stabutos, the anovernamed corporation submits this statement for the purpose of changing at a registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutos and member and member with, and accept the obligations of, Section 607.0505, Florida Statutos SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO DEFICERS AND DIRECTORS IN 12 11. THE WOULD, DONNA G 480 BARNES BYLD. ROCKLEDGE FL 32955 14. CITY-ST-ZIP DELETE 1.1 TITLE DELETE 2.2 NAME 2.3 STREET ADDRESS CITY-ST-ZIP DELETE 3.1 TITLE DELETE 4.1 TITLE DELETE 3.1	HC	JUNLEUGE FL 32900			83	· 				
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11. Pursuant to fibe consistons of Sections 607 0507 and 607 1508, Florida Statutes who above named corporation's board of other or registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes SIGNATURE Signature, typied or prival inverse of registered agent and score prival inverse of registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes SIGNATURE Signature, typied or prival inverse of registered agent and score prival inverse of registered agent is grature required whom reinstalling! 12.					84	City	E	85 Zip	Code	
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	office or registored 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. SIGNATURE									
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CITY-ST-ZIP 6.4 CITY-ST-ZIP 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. Further certify that the information		partify that the information expelled with	h this filing does not availe for				Cooling 110 07/2V// Elevide Statutes 15 others	ortific that it-	information	

Indecept certify that the information supplied with this filling 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 suppliemental 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 in on an attachment with an address.

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