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

PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P9400000165 (8) **DOCUMENT #**

AVALON-LOOKRETIS, INC. Principal Place of Business Mailing Address **608 MANDALAY AVENUE** 29 AVALON ST. **CLEARWATER F 34630** CLEARWATER BEACH FL 34630 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/01/1994 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-3220264 21 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zui Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No Zip Country Personal Property Tax due June 30. 24 25 29 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent Name RUGGLES, THOMAS W 603 INDIAN ROCKS RD. Street Address (P.O. Box Number is Not Acceptable) BELLEAIR FL 34616-2056 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607, 1508, Florida Statules, the above-named 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 agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statules. SIGNATURE (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition n 1.1 TITLE TITLE LOOKRETIS, SOPHIE 1.2 NAME NAME 29 AVALON ST. STREET ADDRESS 1.3 STREET ADDRESS CLEARWATER BEACH FL 34630 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition 2.1 TITLE TITLE LOOKRETIS, JOHN 22 NAME NAME 29 AVALON ST. 2.3 STREET ADDRESS STREET ADDRESS CLEARWATER BEACH FL 34630 CITY-ST-ZIP 2. 4 City-St-ZiP DELETE Addition 3.1 TITLE Change TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DETETE Change Addition 41 TITLE TITLE NAME 4 2 NAME STREET ADDRESS 4 3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Change DELETE Addition 6.1 TITLE TITLE

14. I hereby 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 furstee 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 allightness with an address.

62 NAME

63 STREET ADDRESS

if changed, or on an all achinical with an ac Sephiel dook rule SIGNATURE

STREET ADDRESS

CITY-ST-ZIP

2/98 813-443-1906

FILED

Feb 25 1998 8:00am

Secretary of State