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

CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P9400000841 (4)

SOLI P. DASTUR & ASSOCIATES, INC.

FILED Apr 23 1998 8:00am Secretary of State

|--|--|

Principal Plac	e of Business	Mailing Address	•			1 10111011 110 10111 01011 00111 10111 01111 01	DIN MONN GRADI IONN BIBAL AFOL IRDI	
1800 SECOND ST. 1800 SECOND ST. SUITE 735 SUITE 735 SARASOTA FL 34236 SARASOTA FL 34236						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified		
6 Diam'r 10	land of Divisions	On Mailing Address				12/27/1993 4. FEI Number	I IAVari C	
2. Principal P	lace of Business	2a. Mailing Address					Applied For Not Applicable	
Suite, Apt	# elc	Suite, Apt. #, etc.				65-0461634	CO 75 Additional	
22	., 4,0,	27				5. Certificate of Status Desired	Fee Regulred	
City & State	9	City & State				6. Election Campaign Financing	\$5.00 May Be	
23		28				Trust Fund Contribution		
Zip	Country	Zıp				8. This corporation owes or has paid to	he current year Intangible	
24	25	29	30	30		Personal Property Tax due June 30.		
	9. Name and Address of Curre	ent Registered Agent		81	Name	10. Name and Address of New Regist	tered Agent	
	NNETT, DONALD Y			° '	ияте			
	OO SECOND ST.			82	Street Ad-	Idress (P.O. Box Number is Not Acceptable)		
	NE 735 R aso ta fl 34236			83				
) SA	NAOUTA EL 34230			\perp				
				84	City		FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 607.05	602 and 607.1508, Florida State	utes, the ab	ove-	-named co	orporation submits this statement for the purp ration's board of directors. I hereby accept th		
office or r	egistered agent, or both, in the Sta m familiar with, and accept the obli	te of Florida. Such change was igations of, Section 607.0505, F	s authorized ∃lorida Statu	l by Jies.	the corpor	ration's board of directors. I hereby accept th	e appointment as registered	
SIGNATURE	,							
	Signature, typied or printed name of registered a			Agen	il eignature req	,	DATE	
12.	OFFICERS A	ND DIRECTORS DELETE	13.			ADDITIONS/CHANGES TO OFFICER	Change Addition	
TITLE NAME	DASTUR, SOLI P	[] DELETE	12 NA	-			change rounding	
STREET ADDRESS	6322 THORNDON CIRCLE				ADDRESS			
CITY-ST-ZIP	UNIVERSITY PARK FL		1.4 CITY-ST-					
TITLE	18	DELETE 21					Change Addition	
NAME	DASTUR, JO ANN		2 2 NA	ME				
STREET ADDRESS	6322 THORNDON CIRCLE		2 3 STREET ADDRESS		ADDRESS			
CITY-\$T-ZIP	UNIVERSITY PARK FL		2 4 CF	TY - S1	T-ZIP			
TITLE	DELETE 3.11		3.1 TIT	LE			Change Addition	
NAME			32 NAI	ME				
STREET ADDRESS			3.3 STF	REET A	ADDRESS			
CITY-ST-ZIP		The section	3.4. DO		1-ZIP		Change T 44294	
TITLE		DELETE	41 111				Change Addition	
NAME			4 2 NA					
STREET ADORESS					ADDRESS			
CITY-ST-ZIP TITLE		DELETE	4.4 CIT 5.1 TIT		· 21P		Change Addition	
NAME		L. Dettell	5.1 III				- Joseph	
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP			5.4 CIT					
TITLE		DELETE	6.1 TIT				Change Addition	
NAME			6.2 NAI	ME				
STREET ADDRESS			6.3 STF	REET A	ADDRESS			
CITY-ST-ZIP			6.4 C/T					
	sortify that the information cumplied	with this files door not qualify	for the eve	mnti	on stated	in Section 119 07(3)(i) Florida Statutes I furt	her certify that the information	

indicated on this annual report or supplied with this limit does not quality for the exemption stated in Section 1.19.07(5)(), Florida Statutes. Further certify that the information indicated on this annual report to resupplemental 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, or on an attachment with an address.