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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 13 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

	MENT # P940(RD A. GEGOREK, INC.	0004695 (0)			
Principal Place of Business 819 PEACOCK PLAZA 8TE 560 KEY WEST FL 33040 US		Mailing Address 819 PEACOCK PLAZA STE 580 KEY WEST FL 33042		DO NOT WRITE IN THIS SPACE		
US		US			3. Date Incorporated or Qualified 01/19/1994	
2. Principal Pl	ace of Business	2a, Mailing Address			4. FEI Number	Applied For
21 Cute Apt # ata		26		65-0456023	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State)	City & State			6, Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country 25	Zip	Cour	ntry	8. This corporation owes or has paid the o	
24	[25] D. Name and Address of Currer	29 29 Agent	30		Personal Property Tax due June 30. 10. Name and Address of New Registere	
11. Pursuant toffice or reagent. I ar	o the provisions of Sections 607.050 gistered agent, or both, in the State in fa miliar with, and accept the oblig	12 and 607 1508, Florida Sta of Florida, Such change we ations of, Section 607.0505,	<u> </u>	83 City ove-named corporal by the corporal tes.	poration submits this statement for the purpose ation's board of directors. I hereby accept the a	
	Signature, typed or printed name of registered age			Agent signature requ	pred when reinstating) DATE	and the second s
TITLE	PVPD	D DIRECTORS TO DELETE	13.	if T	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12 Change Addition
NAME	GEGOREK, RICHARD	C Prant	1.2 NA	í		
STREET ADDRESS	19507 SEMINOLE ST		1.3 \$11	REET ADDRESS		
CITY-ST-ZIP	SUMMERLAND KEY FL			Y-ST-ZIP		
TITLE	st Gegorek, Cheryl	DELETE	2.1 TIT	1		Change Addition
STREET ADDRESS	19507 SEMINOLE ST		2.2 NA	ME REET ADDRESS		
CITY-ST-ZIP	SUMMERLAND FL			IY-ST-ZIP	•	
TITLE		DELETE	3.1 TIT	LE		Change Addition
NAME			3.2 NA	ME		
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. CI	Y-ST-ZIP		Change Addition
NAME		_ beccit	4.1 311 4. 2 NA	J		The stands The standards
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP				Y-ST-ZIP		
TITLE		DELETE	5.1 TIT			Change Addition
NAME			5.2 NA	ME		
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP TITLE		DELÊTE		Y-ST-ZIP		☐ Change ☐ Addition
NAME		["] OFFER	6.1 TIT 6.2 NA	•		□ cuange □ Madition
STREET ADDRESS				REET ADDRESS		
OTHER PRODUCTS			0.0 31	inc. Abbit 35		

4. I hereby 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 is 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 is supplied 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 control of the receiver in uslee information in the control of th