SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/07: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

97 AUG 25 PM 1:54

DOCUMENT # P9400009051 (1) MATE MANAGEMENT, INC.				SECRETARY OF STATE TAILAHASSEE, FLORIDA		
Principal Place 1682 9TH ST S ST PETERSBUI US	SOUTH RG FL 33701	Mailing Address 1662 9TH ST SOUTH ST PETERSBURG FL 33701 US		DO NOT WRITE 3. Date Incorporated or Qualified 02/04/1994 4. FEI Number		
21 600 Suite, Apt. 22	2 97459 South	26 Suite, Apt. #, etc.		59-3230395 • 6. Certificate of Status Desired	Not Applicable \$8.75 Additional Fee Required	
23 9 Plaje 23 25 7 24 23 7	fetenous FL. Construction S. Name and Address of Current F		Country 30	6. Election Campaign Financing Trust Fund Contribution 9. This corporation owes or has pa Personal Property Tax due June 10. Name and Address of New Re	30. X Yes No	
BERTHELOT, MARLENE 210 82ND AVE. N. ST. PETERSBURG FL 33702 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the a office or registered agent, or both, in the State of Florida. Such change was authorize agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Sta			83 84 City s, the above-named uthorized by the corr	82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code the above-named corporation submits this statement for the purpose of changing its registered prized by the corporation's board of directors. I hereby accept the appointment as registered		
SIGNATURE	Signature, typed or printed name of registered agent a	nd little if Roplicable (NOTE:	Rogistered Agent signature	required which roinstating)	DATE	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P BETHELOT, MARLENE C 210 82ND AVE. NORTH ST. PETERSBURG FL 32702	DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	ADDITIONS/CHANGES TO OFFIC 400022 -08/27/ *****17	Change Addition	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		DELETE	2.3 STREFT ADDRESS 2. 4 CITY-S1-7IP 3.1 TILLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-S1-7IP		☐ Change ☐ Addition	
THE , MME STREET ADDRESS CITY-ST-ZIP		DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-\$1-ZiP		Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	0. alan 8/25	Change Addition Change Addition	

I do 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 arinual 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 of Block 13 it changed, or on an attachment with armodeless.

NURSE MATES, INC.

pg 2012

302 11th Avenue Northeast St. Petersburg, FL 33701 (813) 894-4572

August18, 1997

Bethelot

Department of State
Division of Corporation
Anual Report Section
P.O. Box 1500
Tallahassee, FL 32302-1500

To whom it may concern:

Please find enclosed two checks for \$165.00 plus \$8.75 for incorporation fees and anual reports for Nurse Mates, Inc. and Mates Mabagement, Inc. 1 have not received a first notice. I have received an first notice for Butterfly Manor, Inc. which was filed on time.

My assumption was that filling time for these two listed corporation wee not due yet.

I apologize and ask that these late fees be removed.

Respectfully submitted,

Marlene Berthelot

Enclosed: