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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Jan 26 1998 8:00am Secretary of State

	MENT # P9400 E DEVELOPMENT GROUP,		)		
Principal Place of Business Mailing Address				I INGLIEDI IIN INILI EIGII NEILI EBILI EBILI EBILI	IBI 11801 OIKIL IODIO OIII DIDI IBDI
404 N MIRAI		404 N MIRAMAR AVE			
INDIAATLAN	TIC FL 32903	Indiaatlantic fl 3290	33	DO NOT WRITE IN T	HIC COACE
				3. Date Incorporated or Qualified	TIIG STACE
				02/24/1994	
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
		26		59-3226797	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
		27	·		Fee Required
23 City & Stat	e	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	<b>28</b> Zip	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	<ol> <li>This corporation owes or has paid the Personal Property Tax due June 30.</li> </ol>	e current year intangible  Yes No
	9. Name and Address of Currer		100	10. Name and Address of New Registe	
	CGARRELL, THOMAS P		81 Name		
5205 BABCOCK STREET NE			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
PALM BAY FL 32905			Giredi Ada	iros (r.o. box Marribor is Not Neceptable)	
			83		
			84 City		<b>85</b> Zip Code
					FL   '
i Office or r	egistered agent, or both, in the State im familiar with, and accept the oblig Signature, lyped or profed name of registered age.	of Florida. Such change was ations of, Section 607.0505, Fl	authorized by the corpora	poration submits this statement for the purportion's board of directors. I hereby accept the	appointment as registered
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		Change Addition
NAME	DERRICK, D M		1.2 NAME		
STREET ADDRESS	404 N MIRAMAR AVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	INDIATLANTIC FL 32903		1.4 CITY-ST-ZIP		
TITLE		☐ DELETE	2 1 TITLE		Change L Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	2 4 CITY-ST-ZIP 3 1 TITLE		Change Addition
NAME			3.2 NAME		change roundit
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		☐ DELETÉ	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP	<u> </u>		4.4 CITY-ST-ZIP		
TITLE		☐ DELETÉ	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP TITLE		☐ DELETE	5.4 CITY - ST - ZIP		Change Addition
NAME		☐ ntrtig	6.1 TITLE		Change Addition
STREET ADDRESS			6.2 NAME		
CITY-ST-ZIP			6.3 STREET ADDRESS		
	entify that the information supplied wi	th this filing does not qualify for	6.4 CITY-ST-ZIP	Section 119.07(3)(i), Florida Statutes, I furlhe	er 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 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