

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 22 1998 8:00am
Secretary of State

DOCUMENT #
Corporation Name

P940000025090

IAD CAPITAL CORP.

Principal Place of Business

Mailing Address

**2198 MAIN STREET
SARASOTA, FL 34237
US**

**2198 MAIN STREET
SARASOTA, FL 34237
US**

DO NOT WRITE IN THIS SPACE

1. Date Incorporated or Qualified
04/01/1994

Principal Place of Business

Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

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2. FEI Number
65-0480204

Applied For
Not Applicable

3. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

4. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

5. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

Name and Address of Current Registered Agent

6. Name and Address of New Registered Agent

**JAENSCH, PETER J
2198 MAIN STREET
SARASOTA, FL 34237**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office of 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 Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE
NAME **Russ Attree**
STREET ADDRESS **2890 Palm Beach Blvd**
CITY-ST-ZIP **Fort Myers, FL 33916**

TITLE **D** ☐ DELETE
NAME **Julian Attree**
STREET ADDRESS **2890 Palm Beach Blvd**
CITY-ST-ZIP **Fort Myers, FL 33916**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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*****150.00**

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. 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 Book 12 or Book 13 if changed. I am attaching with an address

Russ Attree

04/30/98

941-366-9841

CR2E034 (10/97)