## FILE NOW: FILING FEE AFTER MAY 1ST IS \$5\$0.00

CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of Stat DIVISION OF CORPORATIONS

тан т	IMENT # P9400 ILE SALES & INSTALLATIO							
i i		· ·			1			
7509 E. SPANISH TRL P.O. BOX 863 FLORAL CITY FL 34436 FLORAL CITY FL 34436								
	· · · · · · · · · · · · · · · · · · ·	TOURS OF TE STOOL			DO NOT WRITE IN THIS	SPACE		,
					3. Date Incorporated or Qualified			
2 Principal I	Place of Business	2a. Mailing Address			04/04/1994 4. FEI Number	- 1 1		4
21		26			59-3235936	Applied For Not Applicable		ł
Suite, Apt. #, etc. Suite, Apt. #						\$8.75 A		1
27					5. Certificate of Status Desired	Fee Re		
City & State		City & State			6. Election Campaign Financing			
23		28			Trust Fund Contribution	Added to	Fees	4
Zip	Country	Zip	$\vdash$	untry	8. This corporation owes or has paid the cu			ļ
24	9. Name and Address of Curre	nt Registered Agent	30	<del></del>	Personal Property Tax due June 30.  10. Name and Address of New Registered		No.	1
μn	rchen, Louise	···		81 Name	IN HARLE BUR COMPAND AT HAR LARGETTION		_·	1
	00 E. SPANISH TRL			1	(0.0 0 No. 1 - 1 No. 1 - 1 No. 1 - 1 No. 1 - 1 No. 1 N			}
	ORAL CITY FL 34436			82 Street Add	ress (P.O. Box Number is Not Acceptable)			i
. •	0.02 0 12 0.110			83				1
				ha City		85 Zip C	ode.	1
				4 City	FL	<b>-</b>		
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statut	es, the s	bove-named cor	poration submits this statement for the purpose of ation's board of directors. I hereby accept the ap-	of changing its	registered	
agent. I a	am familiar with, and accept the oblig	pations of, Section 607.0505, Fi	orida Sta	teles.	addits board of directors. Thereby accept the ap-	pomimon do i	08/0/0/00	į
SIGNATURE								
12.	Signature, typed or printed name of registered ag OFFICERS AN	ient and title if applicable (NOT ID DIRECTORS	E: Registere	d kgent signature requ	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR:	S IN 12	16
TITLE	P	DELETE	1.1.7	m	ADDITIONAL TRANSPORT	Change	Addition	CR2E034 (10/97)
NAME	KITCHEN, RICHARD	_	1.2 N					¥
STREET ADDRESS	7509 E. SPANISH TRL		1.3 \$	THE ET ADORESS				肾
CITY-ST-ZIP	FLORAL CITY FL 34438		1.40	ST-ZIP				12
TITLE	VP .	DELETE	2.1 TI			Change	Addition	ုပ
NAME	KITCHEN, LOUISE		2.2 N	A E				1
STREET ADDRESS	7509 E. SPANISH TRL		2.3 \$	et adoress				
CITY-ST-ZIP	FLORAL CITY FL 34436		2.40	-		C	Addition	1
TITLE		☐ DELETE	3.1 Ti	Tenana I		Change	Addition	
NAME CTREET ADDRESS			3.2 N					
STREET ADDRESS CITY-ST-ZIP			335					
TITLE		DELETE	3.4. C			Change	Addition	1
NAME			4.2 N					
STREET ADDRESS				T ADDRESS				}
CITY-ST-ZIP			4.4 CI					
TITLE		DELETE	51 TI			Change	Addition	11
NAME			5.2 N					II
STREET ADDRESS			5.3 ST	T ADDRESS				
CITY-ST-ZIP			5.4 CI	ST-ZIP		1 6	1 1 1 1 1 1 1 1	1
TITLE		☐ DELETE	6.1 Til			☐ Change	Addition	[
NAME			6.2 NA					{
STREET ADDRESS			6.3 ST	t address				1

14. I hereby certify that the information supplied with this filing does not qualify for the exclindicated on this annual report or supplemental annual report is true and accurate and officer or director of the corporation or the receiver or trustee empowered to execute the Block 12 or Block 13 if changed, or on an attachment with an address

otion stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information pat my signature shall have the same legal effect as if made under oath; that I am an report as required by Chapter 607, Florida Statutes; and that my name appears in I - 35°2.

**FILED** 

May 01 1998 8:00am

Secretary of State

4-10- 98

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