## 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

## DOCUMENT # 1. Corporation Name P94000029814 (8)

BUBBLE ENTERPRISES, INC.

Principal Place of Business

Mailing Address

## **FILED** May 06 1998 8:00am Secretary of State



1218 TRACY DR PORT ORANGE FL 32119		1218 TRACY DR PORT ORANGE FL 32119				
				DO NOT WRITE IN THE	HIS SPACE	
				04/18/1994		
2, Principal Pl	ace of Business	2a, Mailing Address		4. FEI Number	Applied For	
	A Beville RZ		seville RZ	59-3237367	Not Applicable	
Suite, Apt. 1	₩, <b>૭</b> ἰc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	fona Beach FL	City & State 1 28 Daytona	Beach FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip \			Country Cosse		Yes 🔲 No	
	g. Name and Address of Current	Registered Agent		10. Name and Address of New Register	ed Agent	
	LDANA, NESTOR		81 Name	Nestor Suldane	į	
PORT ORANGE FL 32119				82 Street Address (P.O. Box Number is Not Acceptable)		
			83 S	with Daytona		
			84 City		85 Zip Code 3 2 119	
11. Pursuant t	to the provisions of Sequents 607.0502	and 607.1508, Florida Statutes	s, the above-named co	rporation submits this statement for the purpose	e of changing its registered	
agent I ar				ation's board of directors. I hereby accept the		
SIGNATURE .		ester Suldans	Registored Agent a griature requ	<u> </u>	<u> </u>	
12.	OFFICERS AND		13.	ADDITIONS[CHANGES TO OFFICERS A	-	
TITLE	PO	☐ DELETE	1.1 TITLE	Prosident 1	Change Addition	
NAME	SALDANA, NESTOR		1.2 NAME	Soldana Nester		
STREET ADDRESS	1218 TRACY DR		1.3 STREET ADDRESS	1112 - A Beville Ro	E1 32114	
CITY-ST-ZIP	PORT ORANGE FL 32119		1.4 CITY-ST-ZIP	Daytong Beach	PC 32(1)	
TITLE		☐ DELETE	2.1 TITLE		Change Addition	
NAME			2.2 NAME	•		
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP		DELETE	2. 4 C/TY-ST-Z/P		☐ Change ☐ Addition	
TITLE NAME			3.1 TITLE 3.2 NAME		Citalige L Audition	
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY - S1 - ZIP			
TITLE		DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY - \$1 - ZIP			
TITLE		DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		5.4 CITY - S1 - ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change Addition	
NAME	•		6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP		1	6.4 CITY-S1-ZIP			

Thereby 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 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 officer with all address.