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PROFIT **CORPORATION ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000030215 (5)

FILED Mar 17 1998 8:00am Secretary of State

WOHL	D FEDERA	ation publisher:	S, INC	; .							
Principal Plac	ce of Busines	SS	Ma	iling Address					E LOUPINGU AAN ANIMIT NIDIA BULLU NUSAA NULAA NUTUU EFAFF		4001 BINI 1031
1202 PARRILLA DE AVILA 1202 PARRILLA DE AVI TAMPA FL 33613 TAMPA FL 33613 US US					k				DO NOT WRITE IN THIS S	PACE	
									3. Date Incorporated or Qualified		
A Dringland F	Ness of Dari		7-	NACTOR OF A PROPERTY.					04/21/1994		
2. Principal Place of Business				2a. Mailing Address				-	4. FEI Number		Applied For
Suite, Apt. #, etc.				Suite. Apt. #. etc.					58-2229927		Not Applicable Additional
22				27					5. Certificate of Status Desired	•	Regulred
City & State				City & State					6. Election Campaign Financing		May Be
23			28	28					Trust Fund Contribution		to Fees
Zip	Country			Zip Coui				8. This corporation owes or has paid the current year Intangible			
24	25		29			. <u>. </u>			Personal Property Tax due June 30. Yes No		
g, Name and Address of Current			l Regist	egistered Agent			61	1	Name and Address of New Registered A	gent	
	OKOS, CH					81 Name					
	02 PARRILL		82 Street Add			ddress	(P.O. Box Number is Not Acceptable)	-			
TAMPA FL 33613						83					
						63					
						84	City		FL	65 Zip	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, office or registered agent, or both, in the State of Florida. Such change was auth agent. I am familiar with, and accept the obligations of, Section 607.0505, Florid							e-named of the corposit	corporat oration's		changing pintment as	its registered s registered
SIGNATURE											
Oldi Vitorie	Signature, typed	or printed name of registered agen			: Registere	d Age	nt signature r	equired wh	hen reinstating) DATE		
12.		OFFICERS AND	DIREC		13.				ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	DCEO	40/44/701441 1/ 60		☐ DELETÉ	1.1 TI					L Change	Addition
NAME	Button none with water of the				1.2 NAME 1.3 STREET ADDRESS						
STREET ADDRESS	1										-
CITY-ST-ZIP TITLE	PD	ANTIC FL 32903		DELETE	1.4 C	TY-S	1-ZIP			Change	Addition C
NAME		S, CHRIS P DR.		DEEC16	2.1 II				'	Onlinge	
STREET ADDRESS		ARRILLA DE AVILA			1		ADDRESS				
CITY-ST-ZIP	TAMPA				2.40						
TITLE	VD VD	, <u>L</u>		☐ DELET E	3.1 TI		11-211			Change	Addition
NAME		is, demitri dr.			3.2 N						_
STREET ADDRESS		NY. A1A			3.3 \$1	REET.	ADDRESS				
CITY-ST-ZIP		JRNE BEACH FL 3295	1		3.4. C	ITY-S	T-ZIP				
TITLE	STD			DELETE	4.1 TI	TLE				Change	☐ Addition
NAME		NDHAM, M. DR.			4.2 N	AME					
STREET ADDRESS		NGSFIELD CT.			4.3 S	REET	ADDRESS				
CITY-ST-ZIP	DUNWO	ODY GA 30338			4.4 CI	TY-SI	r-zip				
TITLE	D			DELETE	5.1 TI	TLE				Change	Addition
NAME		SOV, V. DR.			5.2 N						
STREET ADDRESS		MOND AVE.			5.3 \$1	REET	address				
CITY-ST-ZIP	INDIATL	ANTIC FL 32903			5.4 CI		r-ZIP			-	
TITLE				☐ DELETE	6.1 TI				ι	Change	Addition
NAME					6.2 N/						
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP	portification th	a information a unalight wit	h thia fili	ing dage not avalle to	6.4 CI	TY-SI	- ZIP	lia Cast	tion 440 07/0//). Florido Olevido I fuello	14. at .a at.	- :

I nereby 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 attachment with an address.