COF ANNL	PROFIT RPORATION JAL REPORT 1998	Sandra E Secreta	RTMENT OF STATE 6. Mortham ry of State CORPORATIONS	Apr 29 19 Secretar	98 8:00ai y of State
	MENT # P9400 A -LIGHT, INC.	0037243 (0)			
Principal Place of Business 16806 MANDY LANE TAMPA FL 33618		Mailing Address 16606 MANDY LANE TAMPA FL 33618		LINGTROFFITS INTEL IN THIS SPACE	
				 Date Incorporated or Qualified 05/16/1994 	
2. Principal P	lace of Business	2a. Mailing Address		4, FEI Number	Applied For
21		26		59-3241430	Not Applica
Suite, Apt.	#, elc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & Stati	0	27 City & Stato	·····	6. Election Campaign Financing	Fee Required \$5.00 May Be
Zip	Country	28 7ip	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	 This corporation owes or has paid Personal Property Tax due June 3 	
	9. Name and Address of Curre NDRICK, THOMAS C	nt negisteleti Agent	81 Name	10. Name and Address of New Reg	istered Agent
1 06 Tan	06 MANDY LANE MPA FL 33618	02 and 607, 1509, Florida Statut	83 84 City	dress (P.O. Box Number is Not Acceptable	FL 85 Zip Code
166 TAX 11. Pursuant office or r agent. I a SIGNATURE	06 MANDY LANE MPA FL 33618		83 84 City	rporation submits this statement for the pu ation's board of directors. I hereby accept	FL 85 Zip Code
166 TAX 11. Pursuant office or r agent. I a SIGNATURE 12.	to the provisions of Sections 607.056 egistered agent, or both, in the State in familiar with, and accept the oblig Signalure, lyped or protect same of registered age OF FICE.RS AN	ere a dittle if applicable (NOT ID DIRECTORS	B3 B4 City es, the above-named co authorized by the corpor. rida Statutes. Registered Agest signature rea 13.	rporation submits this statement for the pu ation's board of directors. I hereby accept	FL 85 Zip Code rpose of changing its register the appointment as registere DATE DATE
106 TAX 11. Pursuant office or r agent. I a SIGNATURE 12. TITLE	to the provisions of Sections 607.054 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or protect name of registers dieg OF FICE RS AN	eré a ditile il applicable (NOT	B3 B4 City es, the above-named co authorized by the corpor. rida Statutes. Begistered Agent signature rea 13. 1.111LE	rporation submits this statement for the pu ation's board of directors. I hereby accept uired when reinstating)	FL 85 Zip Code rpose of changing its register the appointment as registere DATE DATE
196 TAX 11. Pursuant office or r agent. I a SIGNATURE 12. TITLE NAME	to the provisions of Sections 607.05 agistered agent, or both, in the State m familiar with, and accept the oblig Signature, spector protect some of registered ag OF FICERS AN PD KENDRICK, THOMAS C	ere a dittle if applicable (NOT ID DIRECTORS	63 64 City 65 64 City 65 64 City 65 64 City 65	rporation submits this statement for the pu ation's board of directors. I hereby accept uired when reinstating)	FL 85 Zip Code rpose of changing its register Its register DATE DATE
106 TAX 11. Pursuant office or r agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS	to the provisions of Sections 607.054 egistered agent, or both, in the State in familiar with, and accept the oblig Signature, speet or protect some of registered ag OF FICERS AN PD KENDRICK, THOMAS C 16606 MANDY LANE	ere a dittle if applicable (NOT ID DIRECTORS	B3 B4 City B4 City B4 City corporate corporate	rporation submits this statement for the pu ation's board of directors. I hereby accept uired when reinstating)	FL 85 Zip Code rpose of changing its register Its register DATE DATE
196 TAX 11. Pursuant office or r agent. I a SIGNATURE 12. TITLE NAME	to the provisions of Sections 607.05 agistered agent, or both, in the State m familiar with, and accept the oblig Signature, spector protect some of registered ag OF FICERS AN PD KENDRICK, THOMAS C	ere a dittle if applicable (NOT ID DIRECTORS	63 64 City 65 64 City 65 64 City 65 64 City 65	rporation submits this statement for the pu ation's board of directors. I hereby accept uired when reinstating)	FL 85 Zip Code rpose of changing its register the appointment as registere DATE DATE
106 TAX 11. Pursuant office or r agent. I a SIGNATURE 12. TITLE NAME STREET ADORESS CITY-ST-ZIP	to the provisions of Sections 607.054 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, spect of protect serve of triggelets dieg OFFICERS AN PD KENDRICK, THOMAS C 16606 MANDY LANE TAMPA FL 33618 VD HARRISON, DANIEL M	noi a ditte il appleable (NOT ID DIRECTORS DELETE	B3 B4 City B5 City B6 City B6 City B7 City Statutes. Brigstered Agent signature real 13. 1.1 TILE 1.2 NAME 1.3 SIREE1 ADDRESS 1.4 City-ST-2IP	rporation submits this statement for the pu ation's board of directors. I hereby accept uired when reinstating)	FL 85 Zip Code rpose of changing its register the appointment as registered DATE
106 TAX 11. Pursuant office or r agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	to the provisions of Sections 607.054 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, spect of protect same of figuratical ag OFFICERS AN PD KENDRICK, THOMAS C 16606 MANDY LANE TAMPA FL 33618 VD HARRISON, DANIEL M 709 W HENRY AV	noi a ditte il appleable (NOT ID DIRECTORS DELETE	B3 B4 City B4 City B4 City City Solutionized by the corporation Solutionized by the corporation Solutionized Agences Solution Solution	rporation submits this statement for the pu ation's board of directors. I hereby accept uired when reinstating)	FL 85 Zip Code rpose of changing its register the appointment as registere DATE
106 TAX 11. Pursuant office or r agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or protect plane of registered ag OFFICERS AN PD KENDRICK, THOMAS C 16606 MANDY LANE TAMPA FL 33618 VD HARRISON, DANIEL M 709 W HENRY AV TAMPA FL	ID DIRECTORS	B3 B4 City es, the above-named co authorized by the corpora- prida Statutes. Engetered Agent signature real 13 1.1 TILE 1.2 NAME 1.3 STREE1 ADDRESS 1.4 City-S1-ZiP 2.1 TILE 2.2 NAME 2.3 STREE1 ADDRESS 2.4 City-S1-ZiP	rporation submits this statement for the pu ation's board of directors. I hereby accept uired when reinstating)	FL 85 Zip Code prose of changing its register the appointment as registere DATE RS AND DIRECTORS IN 12 Change Addi Change Addi
106 TAX 11. Pursuant office or r agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-2IP TITLE NAME STREET ADDRESS CITY-ST-2IP TITLE	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or protect even of registered ag OFFICERS AN PD KENDRICK, THOMAS C 16606 MANDY LANE TAMPA FL 33618 VD HARRISON, DANIEL M 709 W HENRY AV TAMPA FL STD	noi a ditte il appleable (NOT ID DIRECTORS DELETE	B3 B4 City B4 City B4 City B4 City City Solutionized by the corporation Solutionized by the corporation Solutionized by the corporation Solution Solutio	rporation submits this statement for the pu ation's board of directors. I hereby accept uired when reinstating)	FL 85 Zip Code rpose of changing its register the appointment as registere DATE ERS AND DIRECTORS IN 12 Change Addition
106 TAX 11. Pursuant office or r agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or protect plane of registered ag OFFICERS AN PD KENDRICK, THOMAS C 16606 MANDY LANE TAMPA FL 33618 VD HARRISON, DANIEL M 709 W HENRY AV TAMPA FL	ID DIRECTORS	B3 B4 City es, the above-named co authorized by the corpora- prida Statutes. Engetered Agent signature real 13 1.1 TILE 1.2 NAME 1.3 STREE1 ADDRESS 1.4 City-S1-ZiP 2.1 TILE 2.2 NAME 2.3 STREE1 ADDRESS 2.4 City-S1-ZiP	rporation submits this statement for the pu ation's board of directors. I hereby accept uired when reinstating)	FL 85 Zip Code prose of changing its register the appointment as registere DATE RS AND DIRECTORS IN 12 Change Addi Change Addi
106 TAX 11. Pursuant: office or r agent. I a SIGNATURE 12. TITLE NAME STREET ADORESS CITY-ST-2IP TITLE NAME STREET ADDRESS CITY-ST-2IP TITLE NAME	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or protect pursue of registered agent OFFICERS AN PD KENDRICK, THOMAS C 18606 MANDY LANE TAMPA FL 33618 VD HARRISON, DANIEL M 709 W HENRY AV TAMPA FL STD KENDRICK, DEBORAH A	ID DIRECTORS	B3 B4 City B5 B4 City B5 City B5 City B5 City City S1 City S1 S1	rporation submits this statement for the pu ation's board of directors. I hereby accept uired when reinstating)	FL 85 Zip Code rpose of changing its register the appointment as registere DATE RS AND DIRECTORS IN 12 Change Addi Change Addi Change Addi
106 TAX 11. Pursuant: office or r agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or protect purce of registered agent OFFICERS AN PD KENDRICK, THOMAS C 18606 MANDY LANE TAMPA FL 300 W HENRY AV TAMPA FL STD KENDRICK, DEBORAH A 18606 MANDY LANE	ID DIRECTORS		rporation submits this statement for the pu ation's board of directors. I hereby accept uired when reinstating)	FL 85 Zip Code prose of changing its register the appointment as registere DATE RS AND DIRECTORS IN 12 Change Addi Change Addi
106 TAX 11. Pursuant: office or r agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or protect purce of registered agent OFFICERS AN PD KENDRICK, THOMAS C 18606 MANDY LANE TAMPA FL 300 W HENRY AV TAMPA FL STD KENDRICK, DEBORAH A 18606 MANDY LANE	ID DIRECTORS	B3 B4 City es, the above-named co authorized by the corpor- orida Statutes. Bigstered Agent signature real 13. 1.1 TITLE 1.2 NAME 1.3 STREE1 ADDRESS 1.4 City - ST-2IP 2.1 TITLE 2 NAME 2 3 STREE1 ADDRESS 2.4 City - ST-2IP 3.1 TITLE 3.2 NAME 3.3 STREE1 ADDRESS 3.4 City - ST-2IP 4.1 TITLE 4.2 NAME	rporation submits this statement for the pu ation's board of directors. I hereby accept uired when reinstating)	FL 85 Zip Code rpose of changing its register the appointment as registere DATE RS AND DIRECTORS IN 12 Change Addi Change Addi Change Addi
196 TAX 11. Pursuant: office or r agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or protect purce of registered agent OFFICERS AN PD KENDRICK, THOMAS C 18606 MANDY LANE TAMPA FL 300 W HENRY AV TAMPA FL STD KENDRICK, DEBORAH A 18606 MANDY LANE	ID DIRECTORS		rporation submits this statement for the pu ation's board of directors. I hereby accept uired when reinstating)	FL 85 Zip Code rpose of changing its register the appointment as registere DATE RS AND DIRECTORS IN 12 Change Addi Change Addi Change Addi
106 TAX 11. Pursuant: office or r agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or protect purce of registered agent OFFICERS AN PD KENDRICK, THOMAS C 18606 MANDY LANE TAMPA FL 300 W HENRY AV TAMPA FL STD KENDRICK, DEBORAH A 18606 MANDY LANE	ID DIRECTORS	B3 B4 City es, the above-named co authorized by the corpor- orida Statutes. Bigstered Agent signature real 13. 1111LE 12 NAME 13 STREE1 ADDRESS 14 City - ST-2IP 21 TITLE 22 NAME 23 STREE1 ADDRESS 2 4 City - ST-2IP 3.1 TITLE 32 NAME 3.3 STREE1 ADDRESS 3.4 City - ST-2IP 4.1 TITLE 4.2 NAME	rporation submits this statement for the pu ation's board of directors. I hereby accept uired when reinstating)	FL 85 Zip Code rpose of changing its register the appointment as registere DATE RS AND DIRECTORS IN 12 Change Addi Change Addi Change Addi
196 TAX 11. Pursuant: office or r agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or protect purce of registered agent OFFICERS AN PD KENDRICK, THOMAS C 18606 MANDY LANE TAMPA FL 300 W HENRY AV TAMPA FL STD KENDRICK, DEBORAH A 18606 MANDY LANE	DELETE		rporation submits this statement for the pu ation's board of directors. I hereby accept uired when reinstating)	FL 85 Zip Code rpose of changing its register DATE BS AND DIRECTORS IN 12 Change Addi Change Addi Change Addi Change Addi Change Addi Change Addi
196 TAX 11. Pursuant: office or r agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or protect purce of registered agent OFFICERS AN PD KENDRICK, THOMAS C 18606 MANDY LANE TAMPA FL 300 W HENRY AV TAMPA FL STD KENDRICK, DEBORAH A 18606 MANDY LANE	DELETE	B3 B4 City es, the above-named co authorized by the corpor- prida Statutes. Registered Agent signature rea- 13. 1.1 TITLE 1.2 NAME 1.3 STREE1 ADDRESS 1.4 City - ST- 2IP 2.1 TITLE 2 NAME 3.3 STREE1 ADDRESS 2.4 City - ST- 2IP 3.1 TITLE 3.2 NAME 3.3 STREE1 ADDRESS 3.4 City - ST- 2IP 4.1 TITLE 4.2 NAME 4.3 STREE1 ADDRESS 4.4 City - ST- 2IP 5.1 TITLE	rporation submits this statement for the pu ation's board of directors. I hereby accept uired when reinstating)	FL 85 Zip Code rpose of changing its register DATE BS AND DIRECTORS IN 12 Change Addi Change Addi Change Addi Change Addi Change Addi Change Addi
196 TAX	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or protect purce of registered agent OFFICERS AN PD KENDRICK, THOMAS C 18606 MANDY LANE TAMPA FL 300 W HENRY AV TAMPA FL STD KENDRICK, DEBORAH A 18606 MANDY LANE	ID DIFFE CTORS	B3 B4 City es, the above-named co authorized by the corpor- orida Statutes. Bigstered Agencesing at the corpor- 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 City - ST- 2IP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 City - ST- 2IP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 City - ST- 2IP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 City - ST- 2IP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 City - ST- 2IP	rporation submits this statement for the pu ation's board of directors. I hereby accept uired when reinstating)	FL 65 Zip Code irpose of changing its register the appointment as registered DATE
196 TAX 11. Pursuant: office or r agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or protect purce of registered agent OFFICERS AN PD KENDRICK, THOMAS C 18606 MANDY LANE TAMPA FL 300 W HENRY AV TAMPA FL STD KENDRICK, DEBORAH A 18606 MANDY LANE	DELETE	83 84 City es, the above-named co authorized by the corpor- orida Statutes. 13. 1.1 TILE 1.2 NAME 1.3 STREET ADDRESS 1.4 City - ST- 2IP 2.1 TILE 2.2 NAME 2.3 STREET ADDRESS 2.4 City - ST- 2IP 3.1 TILE 3.2 NAME 3.3 STREET ADDRESS 3.4 City - ST- 2IP 4.1 TILE 4.2 NAME 4.3 STREET ADDRESS 3.4. City - ST- 2IP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4.4 City - ST- 2IP 5.1 TITLE 5.3 STREET ADDRESS 4.4 City - ST- 2IP 5.1 TITLE 5.3 STREET ADDRESS 5.4 City - ST- 2IP 5.1 TITLE 5.3 STREET ADDRESS 5.4 City - ST- 2IP 6.1 TITLE	rporation submits this statement for the pu ation's board of directors. I hereby accept uired when reinstating)	FL 85 Zip Code rpose of changing its register DATE BS AND DIRECTORS IN 12 Change Addi Change Addi Change Addi Change Addi Change Addi Change Addi
196 TAX 11. Pursuant: office or r agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or protect purce of registered agent OFFICERS AN PD KENDRICK, THOMAS C 18606 MANDY LANE TAMPA FL 300 W HENRY AV TAMPA FL STD KENDRICK, DEBORAH A 18606 MANDY LANE	ID DIFFE CTORS	B3 B4 City es, the above-named co authorized by the corpor- orida Statutes. Bigstered Agencesing at the corpor- 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 City - ST- 2IP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 City - ST- 2IP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 City - ST- 2IP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 City - ST- 2IP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 City - ST- 2IP	rporation submits this statement for the pu ation's board of directors. I hereby accept uired when reinstating)	FL 65 Zip Code irpose of changing its register the appointment as registered DATE