## 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

| 1  | MENT # <b>P9400</b> 0<br>VENTURES, INC.                                       | 0039778 (3)  |  |  | # 1198 1814 1814 1814 1816 1817 1881      |
|--|---|--|--|--|---|
| Principal Place                                    | e of Business   | Mailing Address  |  | 1401/1664 (10 10)   0/85  404   06/1  06/1   | E OLEK DE OBESTE ERROLL I DEBOT HOST 1900 |
| 911 29 AVE W 911 29 AVE W BRADENTON FL 34205 US US |   |  |  | DO NOT WRITE IN TH   | IIS SPACE                                 |
| 9 Principal P                                      | lace of Business  | 2a. Mailing Address  |  | 05/18/1994<br>4. FEI Number  | Application Co.                           |
| 21 21  | lace or business  | 26   |  | 65-0478394   | Applied For Not Applicable                |
| Suite, Apt.  |   | Suite, Apt. #, etc.  |  |  | \$8.75 Additional                         |
| 22 411   | 19THE W   | 27 5 MMB   | <u> </u>   | 5. Certificate of Status Desired   | Fee Required                              |
| City & State                                       | ·   | City & State   |  | 6. Election Campaign Financing   | \$5.00 May Be                             |
| 23 <b>8A-14</b><br>Zip                             | Country   | 28 3 AME   | Country  | Trust Fund Contribution  | Added to Fees                             |
| 24 242   | 05 MANATES  |  | 30 5AME  | <ol> <li>This corporation owes or has paid the<br/>Personal Property Tax due June 30.</li> </ol> | Yes No                                    |
| ,  | 9. Name and Address of Current  | 1==1   | <u> </u>   | 10. Name and Address of New Register   |   |
| BR   | IO 17 AVE W<br>ADENTON FL 34209   |  | 84 City  |  | Zip Code                                  |
| agent. I at<br>SIGNATURE                           | In familiar with, and accept the obligated and separate of registered agents. | tions of, Section 607,0505, Floi<br>THERE A<br>and title if applicable (NOTE | s, the above-harned corporate the corporate rida Statutes.  Registered Agent eignature require | red when reinslating) DAT  | 21.98<br>E                                |
| 12.  | OFFICERS AND  |  | 13.  | ADDITIONS/CHANGES TO OFFICERS  |   |
| TITLE  | D D   | ☐ DELETE   | 1.1 TOTLE  |  | Change Addition                           |
| NAME<br>STREET ADDRESS                             | FRAME, JACKIE L<br>5210 17 AVENUE WEST  |  | 1.2 NAME<br>1.3 STREET ADDRESS   |  | ļ   |
| CITY-ST-ZIP  | BRADENTON FL  |  | 1.4 CITY-ST-ZIP  |  | İ   |
| TITLE  | D   | DELETE   | 2.1 TITLE  |  | Change Addition                           |
| NAME   | FRAME, MARY S   |  | 2.2 NAME   |  |   |
| STREET ADDRESS                                     | 5210 17 AVENUE WEST   |  | 2.3 STREET ADDRESS   |  |   |
| CITY-ST-ZIP  | BRADENTON FL  |  | 2. 4 CITY - ST - ZIP   |  |   |
| TITLE  |   | ☐ DELETE   | 3.1 TITLE  |  | Change Addition                           |
| NAME   |   |  | 3.2 NAME   |  |   |
| STREET ADDRESS                                     |   |  | 3.3 STREET ADDRESS   |  |   |
| City-SI-ZIP  |   | DELETE   | 3.4. Crty-St-ZiP   |  | Change Addition                           |
| TITLE  |   | L DELETE   | 4.1 TITLE  |  | Li Criarige Li Addition                   |
| NAME<br>STREET ADDRESS                             |   |  | 4. 2 NAME<br>4.3 STREET ADDRESS  |  |   |
| CITY-ST-ZIP  |   |  | 4.4 City-ST-ZIP  |  | Ì   |
| TITLE  |   | ☐ D€LETE   | 5.1 TITLE  |  | Change Addition                           |
| NAME   |   | <del></del>  | 5.2 NAME   |  |   |
| STREET ADDRESS                                     |   |  | 5.3 STREET ADDRESS   |  |   |
| CITY-ST-ZIP  |   |  | 5.4 CITY - ST-ZIP  |  |   |
| TITLE  |   | DELETE   | 6.1 TITLE  |  | Change Addition                           |
| NAME   |   |  | 6.2 NAME   |  |   |
| STREET ADDRESS                                     |   |  | 6.3 STREET ADDRESS   |  |   |

14. 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; 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 13 if changed, or on an attachment with an address

SIGNATURE:

JACKEL TRAME

**FILED** 

Apr 27 1998 8:00am

Secretary of State