FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in indicated on this annual report or suppliemental annual report is true and accurate and that my signate officer or director of the corporation or the receiver or true of empowered to execute this report as receiver or true of the corporation or the receiver or true of empowered to execute this report as receiver or true of the corporation or the receiver or true of empowered to execute this report as receiver or true of the corporation of the corporation of the corporation of the receiver or true of the corporation of the corporation of the receiver or true of the corporation of

PROFIT CORPORATION ANNUAL REPORT 1998

STREET ADDRESS CITY-ST-ZIP

Block 12 or Block 13 if changed, or



IT ORIDA DEPARTMENT OF STATE
Sandra B. Mortham

FILED

May 04 1998 8:00am

Secretary of State

A NACANTAN NIK NAUN ANTAN ARNIN BANJI BARNI BARNI BIRNE ANDAN ARNIN MANA ARNI NAM

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000044810 (7)

BAY AREA CERTIFIELD PUBLIC ACCOUNTANTS, P.A.

Principal Plac	ce of Business	Mailing Address	Mailing Address		s southout and three didit point botte dutil or	ile Arbet minne faine statt Mått ibnt
8001 N DALE MABRY SUITE 801 TAMPA FL 33614		8001 N DALE MABRY Suite 601 Tampa Fl 33614		DO NOT WRITE IN	THIS SPACE	
					 Date Incorporated or Qualified 06/09/1994 	
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3252081	Not Applicable	
Suite, Apt. #, etc		Suite, Apt. #, etc.	Suite, Apt. #, etc. 27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be	
Zip	Country	Zip	rip Country		8. This corporation owes or has paid the	
24	25 29 30			Personal Property Tax due June 30. Yes No		
	g, Name and Address of Curi				10. Name and Address of New Regist	
PA	YNE, JAMES D	-	81	Name		
	17 E 109TH AVE		82	Street Add	Iress (P.O. Box Number is Not Acceptable)	
TA	MPA FL 33612		-			
			83			
			84	City		FL 85 Zip Code
11. Pursuant to the provisions of Sections 607 0502 and 607, 1508, Florida Statutes, toffice or registered agent, or both, in the State of Florida, Such change was auth				∍.named corp	poration submits this statement for the purpo	
office or agent 1 a	registered agent, or both, in the Str am familiar with, and accept the ob-	ite of Florida. Such change was ligations of, Section 607.0505, Fl	authorized by lorida Statutes	r the corpora s.	ition's board of directors. I hereby accept the	e appointment as registered
SIGNATURE	,					
	Signature Typed or printed came of regestered			nt signature requ		ATE
12.	OFFICERS A	AND DIRECTORS DELETE	DELETE LATTER		ADDITIONS/CHANGES TO OFFICERS	
NAME	PAYNE, JAMES D		, 1.1 TITLE 1.2 NAME			☐ Change ☐ Addition
STREET ADDRESS	1417 E 109TH AVE		1.3 STREET ADDRESS			
CITY-ST-ZIP	TAMOPA FL		1.4 City-S1-2iP			
TITLE	VP	DELETE	2.1 THILE			☐ Change ☐ Addition
NAME	HAYES, MALCOLM		2.2 NAME			
STREET ADDRESS	503 E DRANE ST S		2.3 STREET ADDRESS			
CITY-ST-ZIP			2. 4 CITY - S	ST-ZIP		
TITLE	8	☐ DELETE	3.1 TITLE		,	Change Addition
NAME	PAYNE, PAMELA B		3.2 NAME			
STREET ADDRESS	TARADA PI		3.3 STREET	i		
CITY-ST-ZIP TITLE	IAMPA FL	DELETE	3.4. CITY - S 4.1 TITLE	51 - ZIP		Change Addition
NAME			4. 2 NAME			Li change Li Addition
STREET ADDRESS			4.3 STREFT	ADDRESS		
CITY-ST-ZIP			4.4 CiTY - ST			
TITLE		☐ DELETE	5.1 THILE			Change Addition
NAME			5.2 NAME	52 NAME		
STREET ADDRESS			5 3 STREET	ADDRESS		
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	5.4 CITY-ST	T- ZIP		
TITLE		DELETE	61 TITLE			☐ Change ☐ Addition
NAME	I		6.2 NAME			