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 #

P94000052418 (8)

FILED Mar 24 1998 8:00am Secretary of State

1. Corporation ECON	on Name O CAB, II		+000002	2410 (0	')			11. <u>1</u> 111. 1111. 1111. 1111. 1111.
Principal Place of Business Mailing Address							- 1 100010001 310 (010) 010) 001(1 800) 001(1 00	int áttin tintt niúdt tinni thit thít thít
2117 BABCOCK ST 2117 BABCOCK ST								
MELBOURNE FL 32901 MELBOURNE FL 32901							DO NOT WOLFE IN T	
[DO NOT WRITE IN T	HIS SPACE
1							3. Date Incorporated or Qualified	
2. Principal Place of Business 2a. Mailing Address						·	07/11/1994 4. FEt Number	Applied For
21	1000 01 0001	11000	 	26			59-3267456	Not Applicable
Suite, Apt	. #, etc.			Suite, Apt. #, etc.				\$8.75 Additional
22			27				6. Certificate of Status Desired	Fee Required
City & Stale City & Stale							6. Election Campaign Financing	\$5.00 May Be
23 28							Trust Fund Contribution	Added to Fees
Ζip	Zip Country		<u> </u>	Zip		/	8. This corporation owes or has paid the	e current year Intargible
24			29				Personal Property Tax due June 30.	Yes No
			f Current Register	ed Agent	B1	Name	10. Name and Address of New Registe	red Agent
	ULMER, DIC				יפ	Mairie		
2117 BABCOCK ST, 103						Street Add	ress (P.O. Box Number is Not Acceptable)	
MELBOURNE FL 32901								
					83			
					84	City		FL 85 Zip Code
11 Purcuant	to the provis	ions of Sections	607 0502 and 607	1508 Florida Stati	itas the abov	e-pamed corr		
	registered ag am familiar w	ient, or both, in t ith, and accept t	he State of Florida. he obligations of, S	Such change was lection 607.0505, F	authorized by lorida Statute	y the corporal	poration submits this statement for the purpo- tion's board of directors. I hereby accept the	appointment as registered
SIGNATURE	Slonature typed	or printed name of tea	estered agent and title if ag	policable (NC	IE: Registered Ac	ent signature regul	red when reinstaling) DA	TF
12.		_ -	ERS AND DIRECTO		13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	PD			DELETE	1.1 TATLE	<u> </u>		Change Addition
NAME	* * * * * * * * * * * * * * * * * * *			1.2 NAME				
STREET ADDRESS 2117 BABCOCK ST. #103			# 103	1.3 S		ADDRESS		
CITY-ST-ZIP MELBOURNE FL 32901)1			T-ZIP		
TITLE	VD			DELETE	2.1 TITLE	7		Change Addition
NAME					2.2 NAME			
STREET ADDRESS 2117 BABCOCK ST. # 103					2.3 STREET	ADDRESS		
CITY-ST-ZIP		URNE FL 3290)1		2.4 CITY-	ST-ZIP		
TITLE	TD			DELETE	3.1 TITLE			☐ Change ☐ Addition
NAME	, ,				3.2 NAME			
STREET ADDRESS	MELDOLIDHE EL 2004				3.3 STREET	ADDRESS		
CITY-ST-ZIP		URNE FL 3290	}1		3.4. CITY-	ST-ZIP		
TITLE	SD	D 1/10/10/05/14		DELETÉ	4.1 TITLE			☐ Change ☐ Addition
NAME		R, KIMBERLY	# 400		4. 2 NAME			
STREET ADDRESS		ABCOCK ST.			4.3 STREET	- 1		
CITY-ST-ZIP	MELDU	URNE FL 3290	<u> </u>	DUCTE	4.4 CITY - S	T-ZIP		Channa 1449
TITLE				DELETE	5.1 TITLE	ĺ	·	Change Addition
NAME	ļ				5.2 NAME			J
STREET ADDRESS	1				5.3 STREET	1		
CITY-ST-ZIP	1			DELETE	5.4 CITY - S 6.1 TITLE	I-ZIP		Change Addition
•				C OFFER				ET CHRIDE ET MODITION
NAME CENTER ADDOCCO	1				6.2 NAME	ADDOCCO		
					6.3 STREET			
CITY-ST-ZIP	L				6.4 CITY-S	1- ZIP	····	

14. Thereby 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Dia Juamen

DICK FULMER

17mm298

(407)951-2774

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