FILE NOW: FILING FEE PROFIT CORPORATION ANNUAL REPORT 1998			FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		Apr 30 1998 8:00an Secretary of State		
	SCOTT'S OF DEST	IN, INC. Mail 835 UN	9766 (3) Iing Address 5 Highway 99 IT #17 STIN FL 32541		3. Date Incorporated or Qualifie	ITE IN THIS SPACE	
2. Principal P	ace of Business	28.	Mailing Address		08/09/1994 4. FEI Number		oplied For
21		26	26		59-3264254	N	ol Applicabl
Sulte, Apt. #, etc.		27			5. Certificate of Status Desired	, ,	Additional equired
City & State			City & State		6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip	Country		Zip	Country	8. This corporation owes or has	paid the current year In	tangible
4	25 9. Name and Address	29 of Current Registe	red Agent	30	Personal Property Tax due Ju 10. Name and Address of New		] No
11. Pureupot	n the provisions of Socian	s 607 0502 and 601	7 1508 Florida Statut	83 50 B4 City 2	nite 4101 Destin	FL 85 32	Code .541
11. Pursuant office or r agent. I a SIGNATURE	105	(70)	·	B4 City 2 tes, the above-named cor authorized by the corpora orida Statutes.	poration submits this statement for th ation's board of directors. I hereby ac		Code is registered registered
	Signature, typed or printed name of re	(70)	appfonble (NOT	B4 City	poration submits this statement for th ation's board of directors. I hereby ac	e purpose of changing i cept the appointment as <u>4/2.4/98</u> DATE	
SIGNATURE	Signature, typed or printed name of re	CERS AND DIRECT	appfonble (NOT	B4 City 2 tes, the above-named cor authorized by the corpora orida Statutes.	poration submits this statement for th ation's board of directors. I hereby ac	e purpose of changing i cept the appointment as <u>4/2.4/98</u> DATE	
SIGNATURE <b>12.</b> Title Name Street address	Signifure, lyped or perilel name of ro OFFIC CONSTANTINE, BESH 955 AIRPORT ROAD	CERS AND DIRECT HARA J APT. 713	applicable (NOT ORS	B4 City B4 City B4 City B4 City bes, the above-named cor authorized by the corpora orida Statutes. F Registered Aport signature requ 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	poration submits this statement for th ation's board of directors. I hereby ac	e purpose of changing i cept the appointment as <u>4/2.4/98</u> DATE FICERS AND DIRECTOR	15 IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature. typed or peritest name of ro OFF II CONSTANTINE, BESH 955 AIRPORT ROAD DESTIN FL 32541 D DUGAS, STEPHEN H 2097 OLDE TOWNE	CERS AND DIRECT HARA J APT. 713	appfonble (NOT ORS DELETE	B4 City B4 City B4 City B4 City B4 City authorized by the corporation of a statutes. F Repistered Agent signature requirements 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	poration submits this statement for th ation's board of directors. I hereby ac	e purpose of changing i cept the appointment as <u>U/2 4/98</u> DATE FICERS AND DIRECTOF	Additio
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Signature. typed or peritest name of ro OFF II CONSTANTINE, BESH 955 AIRPORT ROAD DESTIN FL 32541 D DUGAS, STEPHEN H 2097 OLDE TOWNE	CERS AND DIRECT HARA J APT. 713	Appleable (NOT ORS DELETE DELETE	B4 City   tes, the above-named corrauthorized by the corporation of a statutes. 1   E Reprint a signature required a statutes.   13. 1.1 thtle   1.2 NAME 1.3 STREET ADDRESS   1.4 CITY-ST-ZIP 2.1 thtle   2.2 NAME 2.3 STREET ADDRESS   2.4 City-ST-ZIP 3.1 thtle   3.2 NAME 3.3 STREET ADDRESS	poration submits this statement for th ation's board of directors. I hereby ac	e purpose of changing i cept the appointment as U/2.4/98 DATE FICERS AND DIRECTOP Change	RS IN 12
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