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 #

P94000065387 (0)

NIPPIT, INC.

FILED May 01 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					(LOOINDAT AIN JOHER BEAUT BONIE BENIE BELIEF BELIEF BELIEF BELIEF BELIEF BELIEF BENIEF	1201 1291	
16031 TAMPA TAMPA FL 33	PALMS BLVD W 647		16031 TAMPA PALMS BLVD W TAMPA FL 33647			DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified	
						08/30/1994	
	lace of Business	2a. Mailing A	ddress			 	olied For
21		26					Applicable
Suite, Apt.		Suite, Ap				5. Certificate of Status Desired Fee Rec	
City & State		City & Str	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Zip Country		1	8. This corporation owes or has paid the current year Intangible	
24	25 29 30		Personal Property Tax due June 30. 🔀 Yes 🗌 No		No		
	g. Name and Addres	s of Current Registered Age	nt	1		10. Name and Address of New Registered Agent	
TIPI	Pin, Gerald R			81	Name		
	31 TAMPA PALMS BLY	VD W			Street Ad	ess (P.O. Box Number is Not Acceptable)	
IAN	MPA FL 33647			83			
				84	City	FL 85 Zip C	ode
11. Pursuant office or r	to the provisions of Section egistered agent, or both,	ons 607.0502 and 607.1508, F in the State of Florida, Such o of the obligations of, Section (lorida Statules, the	abov	e-named co y the corpor	rporation submits this statement for the purpose of changing its alion's board of directors. I hereby accept the appointment as r	registered egistered
	in r a minar with, and accep	of the obligations of, Section t	507 0505, Florida S	aiote	S.		ļ
SIGNATURE	Signature, typed or pointed name of	they sered agost and little it applicable.	(NOTL Registe	ered Age	ant's griature req	uired when reinstating) DATE	
12.	OFF	ICERS AND DIRECTORS	13	3.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	3 IN 12
TALE	DPT		DELETE 1.1	TITLE		Change	Addition
NAME	TIPPIN, GERALD R		1.2	NAME			
STREET ADDRESS	3807 NORTHRIDGE	DR	1.3	STREET	ADDRESS		
CITY-ST-ZIP	VALRICO FL 33594		1.4	CITY-S	1- ZIP		
TITLE	DVS		DELETE 2.1	TITLE		☐ Change	☐ Addition
NAME	TIP PIN, BONNIE J		2.2	NAME			
STREET ADDRESS	3807 NORTHRIDGE	DR	2.3	STREET	ADDRESS		
CITY-ST-ZIP	VALRICO FL 33594		2. (4 CITY-	ST - ZIP		
TITLE] DELETÉ 3.1	TITLE		☐ Change	Addition
NAME			3.2	NAME	ļ		
STREET ADDRESS			3.3	STREET	ADDRESS		1
CITY-ST-ZIP			T	I. CITY-:	ST-7IP		
TITLE		<u></u>	DELETE 4.1	TITLE		Change	☐ Addition
NAME				2 NAME			ļ.
STREET ADDRESS					ADDRESS		- 1
CITY-ST-ZIP	···		1	CITY - S	T-ZIP		
TITLE		L	DELETE 5.1	TITLE	ļ	Change	☐ Addition
NAME			5.2	NAME			j
STREET ADDRESS			5.3	STREET	ADDRESS		
CITY-ST-ZIP				CITY-S	1-7IP		
TITLE			DELETE 6.1	TITLE		Change	Addition
NAME			6.2	NAME			
STREET ADDRESS			6.3	STREET	ADDRESS		
CITY-ST-ZIP				CITY - S			
44 I bosoby o	priting that the information	conding with this tiles door	not availfu for the a		tion stated i	in Section 119 07/2)(i) Florida Statutos I further codifu that the i	ntermetice

I nereby 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 informatic indicated on this annual report or supplicated annual report is true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an officer or director of the corporation or the receipt or trusted 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 attaching ent with an address.