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

PROFIT CORPORATION ANNUAL REPORT

1**9**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94

P94000073830 (9)

Y-Y & L. INC.

FILED May 05 1998 8:00am Secretary of State



Mailing Address Principal Place of Business 17812 PEPPER TREE LANE 17912 PEPPER TREE LANE **LUTZ FL 33549 LUTZ FL 33549** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/07/1994 2. Principal Place of Business 2a. Mailing Address Applied For 59-3276236 Not Applicable 26 Sulte, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees 23 Trust Fund Contribution 28 Zip Country Zφ Country 8. This corporation owes or has paid the current year Intangible 30 Personal Property Tax due June 30. ☐ Yes ☐ No 24 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name LIMA, ALBERT P 17912 PEPPER TREE LANE 82 Street Address (P.O. Box Number is Not Acceptable) **LUTZ FL 33549** 83 84 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of. Section 607.0505, Florida Statutes. SIGNATURE (NO1E Registered Agent signature required when reinstating) Signature, typed or printed name of registerest agrict and also if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. DELETE Change Addition TITLE 1.1.1111.5 YANGER, WILLIAM H JR. NAME 1.2 NAME CR2E034 STREET ADDRESS 324 S. HYDE PARK AVE., SUITE 210 1.3 STREET ADDRESS TAMPA FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITE 2.1 TITLE NAME YANGER, WILLIAM L 2.2 NAME 324 S. HYDE PARK AVE., SUITE 210 STREET ADDRESS 2.3 STREET ADDRESS tampa fl CITY-ST-ZIP 2 4 CITY - ST - ZIP DELETE Change Addition NAME **ALBERT, LIMA** 3.2 NAME STREET ADORESS 17912 PEPPER TREE LANE 3.3 STRÉET ADDRESS CITY-ST-ZIP LUTZ FL 3.4. CITY-S1-ZIP DILETE ☐ Change Addition TITLE 4.1 1111.6 NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 City - St - ZiP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - \$1 - 2IP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY-ST-ZIP 64 CITY-ST-ZIP

14. Thereby certify that the information supplied with this filling 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 available until an address.