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 #

P94000091542 (8)

AID EVEDETT INC

FILED Feb 04 1998 8:00am Secretary of State

MIN CV	ENETT, INC.							
Principal Plac	e of Business	Mailing Address	Mailing Address					AND HALL
3000 W HILLS TAMPA FL 33	SBOROUGH AVE 614	3800 W HILLSBOROUG TAMPA FL 33614	3800 W HILLSBOROUGH AVE TAMPA FL 33614			DO NOT WRITE IN THIS	SPACE	
						3. Date Incorporated or Qualified		
						12/19/1994		
	'lace of Business	2a, Mailing Address				4. FEI Number	Δ	pplied For
21		26	· · · · · · · · · · · · · · · · · · ·			59-3290299		ot Applicable
Suite, Apt.	#, e lc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	,	Additional
22 City & Stat		Criu P State	City & State					lequired
23	•	<u></u> '	28			Election Campaign Financing Trust Fund Contribution		May Be
Zip	Country	Zip	Pip Country			Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible		
24	25	29	30			Personal Property Tax due June 30.	— · -	No I
	9. Name and Address of Cui					10. Name and Address of New Registered		
4 1 85	BRANO, ANDREW J			81 1	Name			
101 E KENNEDY BLVD				90 6	Ciront Addres	or (D.C. Boy Number in Not Accomplete)		
	TE 3700		82			ss (P.O. Box Number is Not Acceptable)		
	MPA FL FL336-02							
tra	WATE FEEDO DE				Dit.		last 3	
				84 (City	FI	_ 85 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE								
SIGNATURE	Signature, typed or printed name of registered	d agent and the if applicable {N	Ciff: Registered	Agent s	signature required	when reinstating) DATE		
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	-		1.1 T(T	. F			Change	Addition
NAME	WOOLEY, J.I.		1,2 NAME					ľ
STREET ADDRESS 3800 W. HILLSBOROUGH AV		AVE.	1.3 STREET ADDRES		DRESS			Į:
CITY-ST-ZIP	TAMPA FL	- I postt	1.4 CITY - ST - ZIP		'IP			
TITLE				2.1 TITLE			Change	☐ Addition [
NAME			2.2 NAME					
STREET ADDRESS			2.3 STREET ADDRESS					
CITY-ST-ZIP TITLE		DELETE	2. 4 CITY - ST - ZIP TE 3.1 TITLE		ZIP		Change	Addition
NAME		_ bitte						LT YOURS
STREET ADDRESS	OUBES			3.2 NAME 3.3 STREET ADDRESS				
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NAME			4. 2 NA					
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CITY-ST-ZIP				(-ST-Z	1			}
TITLE		☐ DELETE	5.1 TITI		ir		Change	Addition
NAME			5.2 NAI					
STREET ADDRESS				III. Eet ade	DRESS			
CITY-ST-ZIP				(-ST-Z				
TITLE			61 TIT				Change	Addition
NAME			62 NA				_ •	-
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CITY-ST-ZIP				/- ST-2				
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I hereby 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 12 or Block 13 if changed, or on an attachment with an address.

1/22/90