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

PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000002842 (9)

Principal Place of Business	Mailing Address 1212 BEN FRANKLIN DR., SUITE 1002 SARASOTA FL 34236			
1212 BEN FRANKLIN DR., SUITE 1002 SARASOTA FL 34236				
Principal Place of Business	2s. Mailing Address			
2. Principal Flace of Business	26 Raining Address			
Suite, Apt. #, etc.	Suite, Apt. #, etc.			

FILED Apr 06 1998 8:00am Secretary of State



Tincipal Place of Business			Mailing Address				· · · · · · · · · · · · · · · · · · ·		
1212 BEN FRANKLIN DR., SUITE 1002 1212 BEN FRANKLIN DR., SUITE 1 SARASOTA FL 34236 SARASOTA FL 34236				1002	DO NOT WRITE IN THIS SPACE				
							3. Date Incorporated or Qualified		
						01/09/1995			
Principal Place of Business 2a. Mailing Address			. Mailing Address	is .			4. FEI Number	Applied For	
26							23-2030951	Not Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State			City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country 25	29	Zip Country				8. This corporation owes or has paid the curr Personal Property Tax due June 30.	ent year Intangible Yes	
g, Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent			
WEISBROT, RAYMOND J				61	Name				
1212 BEN FRANKLIN DR., SUITE 1002 SARASOTA FL 34236			82	Street Address (P.O. Box Number is Not Acceptable)					
				83					
					84	City FL 85 Zip Code			
 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. 									
GIGNATURE									
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE									

S 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TIFLE 1.1 TITLE ☐ Change Addition WEISBROT, RAYMOND J 1.2 NAME 1212 BEN FRANKLIN DR., SUITE 1002 STREET ADDRESS 1.3 STREET ADDRESS SARASOTA FL 34236 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Addition Change TITLE 2.1 TITLE WEISBROT, ANDI R NAME 2.2 NAME 1212 BEN FRANKLIN DR., SUITE 1002 STREET ADDRESS 2.3 STREET ADDRESS SARASOTA FL 34238 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Addition 3.1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST- ZIP CITY-ST-ZIP ■ DELETE Change ■ Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME

6.4 CITY-ST-ZIP 14. I hereby 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.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

RAYMUND J. WEIBBUT