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 # P95000004113 (3)

MARK S. CHAMBERS, INC.

Principal Place of Business

Mailing Address

FILED May 07 1998 8:00am Secretary of State



4161 CARMICHAEL AVE., SUITE 202 JACKSONVILLE FL 32207		4161 CARMICHAEL AVE SUITE 202 JACKSONVILLE FL 32207					
					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified 01/01/1995		
2. Principal Place of Business		2a, Mailing Address			4. FEI Number		Applied For
1		26			59-3295872	295872 Not Applicable	
Suite, Apt. #, etc.		Suite, Apt #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	0	City & State			6. Election Campaign Financing	\$5	.00 May Be
3		28			Trust Fund Contribution Added to Fees		
Žip	Country	Zip Country		ry	 This corporation owes or has paid the current year Intangible 		
<u> </u>	25	29	30		Personal Property Tax due June 30.	X Yes	[] No
	g, Name and Address of Curre	nt Registered Agent	<u>-</u> -	л.,	10. Name and Address of New Registered	I Agent	
	AMBERS, MARK S		8	1 Name			
	B1 CARMICHAEL AVE., SUITE 2	02	B2 Street Ad		dress (P.O. Box Number is Not Acceptable)		
JAC	CKSONVILLE FL 32207		L				
			8	3			
			8	4 City		85	Zip Code
			•	Chy	Fi	_ [83]	zip code
IGNATURE	m familiar with, and accept the oblig				poration submits this statement for the purpose ation's board of directors. If hereby accept the ap		
		AD DIRECTORS	13.	gent signaturo requ	ADDITIONS/CHANGES TO OFFICERS AN	ID DIREC	TORS IN 12
rle	D	DELETE			ADDITIONS/CHANGES TO OFFICERS AF	Cha	
AME	CHAMBERS, MARK S		1 1 TITLE 1.2 NAM	. 1			
TREET ADDRESS	4161 CARMICHAEL AVE., SL	HTF 202		E1 ADDRESS			
	JACKSONVILLE FL 32207						
TTY-ST-ZIP		DELETE	1.4 CITY 2.1 TITLE	31-21		Cha	nge Addition
IAME			2 2 NAME	.			
STREET ADDRESS				ET ADDRESS			
HTY-ST-ZIP			2.3 STNC				
MLE	DELETE		3 1 TITLE	- 31-21		Chai	nge Addition
WE			3.2 NAME			_	
TREET ADDRESS			•	F ADDRESS			
HY-ST-ZIP			34 CITY	Į.			
TLE		DELETE	4.1 TILLE			Chai	nge
IAME			4. 2 NAM	E			
TREET ADORESS				1 ADDRESS			
ATY-ST-ZIP			44 CITY	ST-ZIP			
ITLE		☐ DELFTE	5 1 TITLE			Char	nge 🔲 Addition
MME			5.2 NAME				
TREET ADDRESS			5 3 STHE	1 ADDRESS			
ATY-ST-ZIP			5.4 CHTY	ST-ZIP			
TLE		DELETE	6.1 TITLE			☐ Char	nge Addition
WE			6.2 NAME	Ì			
STREET ADDRESS			63 STREE	T ADDRESS			
CITY-ST-ZIP							
			6.4 CITY-		n Section 119.07(3)(i), Florida Statutes. I further		

officer of director of the corporation or the receiver 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