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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT

Sandra B. Morth

Secretary of Stat

DIVISION OF CORPORA TIONS

STATE

FILED Mar 24 1998 8:00am Secretary of State

DOCUI	MENT # P9500	0011499 (7)					
	SPECIALISTS, INC.	• •				e.	
Principal Place	of Business	Mailing Address				Bāt likli alaia la	
309 ST_LUCI		309 ST. DUCIE LANE					
FT. PIERCE F		FT. PIERCE FL 34946		•			
′₩					NOT WRITE IN THIS	SPACE	
CHANGID				3. Date Incorporated or 02/10/1995	Qualified		
	Place of Business	2a. Mailing Address		4. FEI Number		·	optied For
21 435 46 CT Sulte, Apt. #, etc.		26 430 46 CT		65-0552869			ot Applicable
	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status I	Desired 🔲	\$8.75	Additional equired
City & State	10	City & State		e Circlina Consension 5			
		⊢	£.,	6. Election Campaign F Trust Fund Contribut		Added	May Be
23 <i>ViRb</i> Zip	BEACH FL Country	28 VFRU BEASH	Country	8. This corporation owe			
24 32968	<u>├</u> ¬	29 32968 3	-	Personal Property Ta	•	/	No
	9. Name and Address of Currer	nt Registered Agent	1	10. Name and Address		d Agent	
LIG	SHTLE, ROGER G ROGER	WAS FIRED AS	81 Name	_			
200	O OT THE LANE	•	1 .24	Address (P.O. Box Number is No	t Assentable)		
FT.	. PIERCE FL 34946 PRA & Dバー	<i>T</i> .	1 1	Address (F.O. Box Number is No	nt Acceptable)	· ,	
	BISHUP - PRES: DER	IT TREASURER	103 100	e. Bilout			
RIBIALA	LIGHTIE - YILL PRES.	COUNT) GOLRETARY	84 City		FI	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statutes	, the above-named	corporation submits this stateme	ent for the purpose	of changing it	s registered
office or n	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the oblig	e of Florida. Such change was aut lations of Section 607 0505. Florid	thorized by the corp da Statutes	poration's board of directors. The	reby accept the ap	pointment as	registered
SIGNATURE	_			required when reinstating)		e-18	
	Signature, typed or printed name of registered age				3-2 DATE	o-18	
SIGNATURE	Signature, typed or printed name of legistered age OFFICERS AN	ent and title if applicable (NOTE: F	Registered Agent signature	required when reinstating)	DATE TO OFFICERS AN	o-18	
SIGNATURE	Signature, typed or printed name of fegistered age OFFICERS AN PT LIGHTLE, ROGER G	colland title if applicable (NOTE F	Registered Agent signature	ADDITIONS/CHANGE	DATE TO OFFICERS AN	e-18 ID DIRECTOR	IS IN 12
SIGNATURE 12. TITLE	Signature, typed or printed name of fegistered age OFFICERS AN PT LIGHTLE, ROGER G 309 ST. DACIE LANE	colland title if applicable (NOTE F	Registered Agent signature 13. 1.1 TiTLE	ADDITIONS/CHANGE PRASIDENT / TR BISHOP	DATE TO OFFICERS AN	e-18 ID DIRECTOR	IS IN 12
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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 frue and accurate and that my signature shall have the same legal effect as if made under oath; that I m 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.