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

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

	1998	The state of the s	DIVISION OF	CORPORATION	ONS	Secretary	y of	State
DOCL 1. Corporal A1	JMENT # +	95000 Hiradn	00148 e.	23				
	oce of Business	_ , Ma	ling Address					
1 8 K	59altar	nard	-					
						DO NOT WRITE IN THE	S SPACE	
Jacksonville FL 32216						3. Date Incorporated or Qualified 08-01-95		
	Piace of Business	28. 1	Mailing Address			4. FEI Number	<del></del>	pplied For
Suile, Apt	# 010	26	Tuite Ant # ate			59-3293780		lot Applicable
22 Suile, Apr	#, E(C.	27	Buite, Apt. #, etc.			5. Certificate of Status Desired	• • •	Additional equired
City & Sta	to		City & State			6. Election Campaign Financing	\$5.00	May Be
23	······································	28	····	.,		Trust Fund Contribution		to Fees
Zip	Countr	′ <u></u>	?ip	Country		8. This corporation owes or has paid the ci		_ ~
24	9 Name and Addre	29 ess of Current Register	red Agent	30		Personal Property Tax due June 30. 10. Name and Address of New Registered	-71	No
<u> </u>	·		100 Agont	81	Name	To. Hame and Madieza of New Registered	Agoin	
Jus	oul D. C 5 Octan			82	Creat Ad	dress (P.O. Box Number is Not Acceptable)	<del></del>	
810	5 OUTAn	ra ica.		02	Sireet Au	dress (F.O. Box Number is Not Acceptable)		
Ta	cksonuill	1 7r 38	حاله	83				
0,				84	Cily		<b>65</b> Zip	Code
44 0	1.11.2	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1500 Flor de Cont.	on the share	named sa	FI FI	<b>∟  </b>	
office or r	regist <b>e</b> red agent, or both	i, in the State of Florida.	Such change was a	uthorized by	the corpora	rporation submits this statement for the purpose alion's board of directors. I hereby accept the ap-	or changing it pointment as	ts registered registered
	ini familiar with, and acc	ept the obligations of, S	Section 607.0505, Fig	orida Statutes.				1
SIGNATURE .	Signature Typed or printed name	of registrica agent and tale if a	pprcable (NO1	E. Registered Agen	I signature requ	used when reinstating) DATE		
12.		FFICERS AND DIRECT		13.		ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	Problems	ς <u> </u>	☐ DELĒTE	11 TITLE			Change	☐ Addition
NAME	Kussiee &	5.0wm amard, will, 7L3		1.2 NAME				*
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NAME				2.2 NAME	1		- Change	L Addition
STREET ADDRESS				23 STREET A	DURESS			
CITY-ST-ZIP				2 4 CITY-S1	l l			
THLE			DELETE	3.1 1ITLE			Change	Addition
HAMÉ				3 2 NAME				
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CITY-ST-ZIP			DELETE	34 CITY-ST	ZIP			
THLE			DILLETE	4 1 Mile			Change	☐ Addition
NAME STREET ADDRESS				4 2 NAME 4 3 STREET A	- ODF OO			
CITY-ST-ZIP				4 4 CITY - ST -				
TITLE			DELETE	51 TITLE	211		Change	Addition
NAME				5.2 NAME				
STREET ADDRESS				53 STREET AL	IDRESS			
CITY-ST-7IP				5.4 CITY - ST -	ZIP			
111LF	-		☐ DELETE	61 TITLE		and grant grant grant grant grant grant grant grant	☐ Change	☐ Addition
NAME				6.2 NAMF		1000025363	3 <b>U</b> 1	1/1/
STREET ADDRESS				63 STREET AD	DRESS	-05/27/9801029	J <b>3</b> 3	) 4W
CITY-ST-ZIP	and be that the information	curplied with the 4lex	door not evel to	6.4 C(1) Y - ST -		***150.00		

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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath, 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 a) attachment with an address.

SIGNATURE:

**FILED** 

May 26 1998 8:00am