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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000016834 (0)

ENTERPRISE ZONE INC.

Principal Place of Business 31142 COVE RD.

Mailing Address

31142 COVE RD.

FILED Jan 29 1998 8:00am Secretary of State



TAVARES FL 32778 TAVARES FL 32778 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/27/1995 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 59-3302014 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 MASSEY, TANGIE L 31142 COVE RD. Street Address (P.O. Box Number is Not Acceptable) **TAVARES FL 32778** 83 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE Change Addition SENTURK, VEDAT NAME 1.2 NAME 11322 DEAD RIVER RD STREET ADDRESS 1.3 STREET ADDRESS TAVARES FL 32718 CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE MASSEY, GIDEON H 2,2 NAME NAME 31142 COVE RD. STREET ADDRESS 2.3 STREET ADDRESS **TAVARES FL 32778** CITY - ST - ZIP 2. 4 CITY - ST-ZIP DELETE Change Addition TITLE 3.1 TITLE MASSEY, TANGIE L NAME 3.2 NAME 31142 COVE RD. STREET ADDRESS 3.3 STREET ADDRESS TAVARES FL 32778 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change TITLE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CATY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE ☐ Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

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 an an attachment with an address.

SIGNATURE:

5.4 CITY - ST - ZiP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

CITY - ST - ZIP

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME

DELETE

Change

☐ Addition

CR2E034