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

CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P95000017860 (4)

FILED May 06 1998 8:00am Secretary of State

ED CAP	RO, INC.							
Principal Place	e of Business	Mailing Address						
15121 AUBRE' SPRING HILL		15121 AUBREY AVE. Spring Hill Fl 34610				DO NOT WRITE IN TI	HIC CDACE	
						3. Date Incorporated or Qualified	III OI ACE	
						03/03/1995		
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	1	Applied For
21		26				59-3302531	1	Not Applicable
Sulte, Apt. (#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional
22		27						Required
City & State	9	City & State				6. Election Campaign Financing Trust Fund Contribution		O May Be d to Fee≴
Z ip	Country	28	Cou	nirv				
24	25	29	30			8. This corporation owes or has paid the current year Interdible Personal Property Tax due June 30. Yes Yes		
1	9. Name and Address of Curren		100			10. Name and Address of New Registe		
CAF	RO, EDMUND			81	Name			
	21 AUBREY AVE.		82 Street Ad		Street Addre	ess (P.O. Box Number is Not Acceptable)	<u></u> -	
SPF	RING HILL FL 34610					So (10. Dox 140/1001 to 110/1000 plable)		
				83			_	
				84	City		- 85 Zig	Code
							-L	
office or re agent. I ar SIGNATURE	agistered agent, or both, in the State or familiar with, and accept the oblig	of Florida. Such change was ations of, Section 607.0505, F	authorized Torida Stat	d by utes	the corporation	oration submits this statement for the purpor on's board of directors. I hereby accept the	appointment a	s registered
	Signature, typed or printed name of registered agr			i Ager	nt signature require			
12.	DEFICERS AN	D DIRECTORS DELETE	13.	T) E		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	
TITLE NAME	CARO, EDMUND	1.2		.1 TITLE .2 NAME .3 STREET ADDRESS			E Olialigo	L Addition
STREET ADDRESS	15121 AUBREY AVE.							
CITY-ST-ZIP	SPRING HILL FL 34610		1.4 CITY - ST - ZIP					
TITLE	9111110 1112 12 01010	DELETE 2.1		_	1-21/		Change	Addition
NAME		-	2.2 NAME				- •	_
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP			2.4 C		į.			
TITLE		☐ DELETE	DELETE 3.1 TO				Change	☐ Addition
NAME			3.2 N/	ME				
STREET ADDRESS			3.3 ST	REET	ADDRESS			
CITY-ST-ZIP		···	3.4. C		T-ZIP		· <u> </u> -	
TITLE		☐ DELETE	4.1 TI				☐ Change	☐ Addition
NAME			4. 2 N					
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP		DELETE	4.4 CI		1 - ZIP		Change	Addition
TITLE		בש טנננונ	5.1 TI				Onlings	Addition
NAME STREET ADDRESS			5.2 N/		ADDRESS			
STREET ADDRESS								
CITY-ST-ZIP TITLE				CITY-S1-ZIP TITLE			Change	Addition
NAME		— •	6.2 NA					
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP			6.4 CI					
14. I hereby c			for the exe	mpt	ion stated in S	Section 119.07(3)(i), Florida Statutes. I furthe		
officer or o	on this annual report or supplementa director of the corporation or the rec or Block 13 if changed, or on an atta	eiver or trustee empowered to	ccurate and execute t	d tha his r	at my signature eport as requi	e shall have the same legal effect as if mad ired by Chapter 607, Florida Statutes; and t	e under oath; t hat my name a	hat i am an ppears in