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 # P95000019623 (4)

FILED Feb 11 1998 8:00am Secretary of State

CLINT	S CITGO	INC.									
Principal Plac	e of Busines	\$	М	arling Address						1969 (111 168)	
1285 SOUTH	HIGHLAND A	185 SOUTH HIGHLAND AVE.									
CLEARWATER FL 34616 CLEARWATER FL 34616								DO NOT INDITE ALT	10.0DA.0E		
								DO NOT WRITE IN TH	IS SPACE		
								3. Date Incorporated or Qualified			
Principal B	lace of Rusia	None .	12-	, Mailing Address				03/10/1995 4. FEI Number	1 1	antiad For	
2. Principal Place of Business				<u> </u>				"	 	opplied For lot Applicable	
Sulte, Apt. #, etc.				Suite, Apt. #, etc.			**** **********************************	59-3302783	CQ 75 Additional		
22			27	27				5, Certificate of Status Desired		Required	
City & State				City & State				6. Election Campaign Financing			
23			28	28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip Country			1201	Zip Country			,	8. This corporation owes or has paid the current year Intangible			
24		25	29	·	30	·		Personal Property Tax due June 30.		□ No	
	g. Name	and Address of Currer		lered Agent	1 1			10. Name and Address of New Register	ed Agent		
CA	RTER, WIL	MA R				81	Name				
		HLAND AVENUE				82	Street Addre	ess (P.O. Box Number is Not Acceptable)			
	EARWATER					02	Street Addre	ass (F.O. Box Number is Not Acceptable)			
-		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				83					
						0.4	0:1.		10-11-2:-		
						84	City	F	85 Zip	Code	
11. Pursuant office or r	to the provis registered ag im familiar w	ions of Sections 607.050 lent, or both, in the State th, and accept the obligi	2 and 6 of Florid ations of	07.1508, Florida Statut da. Such change was a f, Section 607.0505, Fk	es, the a authorize orida Sta	bove d by lutes	e-named corporations.	oration submits this statement for the purpose on's board of directors. I hereby accept the a	of changing appointment as	its registered s registered	
SIGNATURE											
	Signature, lyped	or printed name of registered ago				d Age	ni egnature require				6
12.		OFFICERS AN	D DIREC	DELETE DELETE	13.	74.5		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO Change	RS IN 12	ξ
TITLE	CADTE	WILLIAM D		□ percue	1.1 10				[_] Change	L. Addition	Į
NAME		, wilma R. Ke view Rd.			1.2 N						Š
STREET ADDRESS		VATER FL 34616			1		ADDRESS				ĕ
CITY-ST-ZIP TITLE	S/T	MIENTE STOTO		DELETE	1.4 Cl 2.1 Tl	• • • • • • • • • • • • • • • • • • • •	T-ZIP		Change	Addition	Ĉ
		, CLINTON M.		D perior	2.2 N			***	Onlarige	/dution	Ì
STREET ADDRESS		KE VIEW RD.					ADDRESS				
		VATER FL 34616									
CITY-ST-ZIP TITLE	OCCAIT	MILITE OTOTO		DELETE	3.1 Ti		ST-Z(P		Change	Addition	
NAME					3.2 N		1				
STREET ADDRESS							ADDRESS				
							ADDIRESS ST - ZIP				
CITY-ST-ZIP TITLE				DELETE	4.1 TI		,, 411		Change	Addition	
NAME				-	4.2 N				_ •	_	
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP					4.4 CI						
TITLE				☐ DELETE	5 1 TI	_			Change	Addition	
NAME					5.2 N/		Ì		_		
STREET ADDRESS					1		ADDRESS .			Ī	
CITY-ST-ZIP					5.4 CI						
TITLE				DELETE	6.1 TI				Change	Addition	
NAME					6.2 NA	AME					
STREET ADDRESS							ADDRE\$S				
CITY-ST-ZIP					6.4 CI	TY-S	T- Z IP			-	
	ertify that the	e information supplied w	ith this f	ling does not qualify to				Section 119.07(3)(i), Florida Statutes, I further	certify that the	e information	

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 turtner 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 on an attachment with an address.