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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000023007 (4)

MARTHA'S BOOK VINEYARD, ETC. GREETING CARD OUTLE T INC.									
Principal Place of Business Mailir			ess			- I INDIIIORI III INSIAI DIIII ODIII DOIII D	e kar di ring ing	IND 1910 BRIST BEIST FOOT (DØ)	
12005 INDIAN ROCKS RD. LARGO FL 33774 US		12005 INDIAN ROCKS RD. LARGO FL 13044 33 77 4				DO NOT WRITE IN THIS SPACE			
 			, 			3. Date Incorporated or Qualified 03/20/1995			
2. Principal Place of Business		2a. Mailing Address				4. FEI Number		Applied For	
21		26				59-3313054	Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State		City & Stale				6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zip 24	Country 25	Zip Country 29 30				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
g, Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
CADDEN, MARTHA 1214 9TH CIRCLE S.E. LARGO FL 34841				81 62 83	Name Street Addre	Name Street Address (P.O. Box Number is Not Acceptable)			
				84	City		FL		
11. Pursuant office or r agent. I a	to the provisions of Sections 607 registered agent, or both, in the sam familiar with, and accept the c	2.0502 and 607.1508, Fli State of Florida. Such ch obligations of, Section 60	orida Statutes, the a lange was authorize 37.0505, Porida Sta	bove d by tutes	e-named corporations.	oration submits this statement for the on's board of directors. I hereby acce	purpose o	pointment as registered	
SIGNATURE	Martha S. Signature typod or printed turns of registers	Cadde	n Mad	lia	mi signature require	den. Tresident	DATE	4-8-98	
10		S AND DIRECTORS	1 13			ADDITIONS/CHANGES TO OSSI		D DIRECTORS IN 42	

DELETE Спапре 1.1 TITLE CADDEN, MARTHA S NAME 1.2 NAME 1214 9TH CIRCLE S.E. STREET ADDRESS 1.3 STREET ADDRESS LARGO FL 34641-1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST-ZIP TITLE DELETE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. Thereby certify that the information supplied with this filling 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if_ehanged_or on an altachment with an address.

Martha S. Cadden

FILED

Apr 14 1998 8:00am

Secretary of State