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 # P95000026359 (6)

INDIVIDUAL LIFESTYLES, INC.

FILED May 19 1998 8:00am Secretary of State



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Principal Place of Business Mailing Address						i (#4)(#4) (#4 (#18) \$1)((#4)() #8)((#4)	II 44114 IIŞIP A	188 (118: 8)	118 1811 1811	
4410 LAFAYETTE STREET 4410 LAFAYETTE STREET MARIANNA FL 32446 MARIANNA FL 32446						1				
MANIANNA FL 32440						DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualified				
9 Principal P	lace of Business	2a. Mailing Address			-	03/30/1995 4. FEI Number		1 14.	antiad Far	
— A(7)	LI JUTTURSON ST	26 PO BO	X 3	66		59-3301823			oplied For ot Applicable	
Suite, Apt.		Suite, Apt. #, etc.	71						Additional	
22						5. Certificate of Status Desired		Fee Ro	equired	
City & State				•		Election Campaign Financing \$5.00 May Be				
23 M A		NIVA 1 28 MARIANNA F				Trust Fund Contribution				
24 324		29 32448	30	iii y		Personal Property Tax due June	~~		langible No	
	9. Name and Address of Curre		1001			10. Name and Address of New Reg				
HIL	L, D awn E			81 N	lame					
4361 DEERING STREET MARIANNA FL 32446					reet Addr	t Address (P.O. Box Number is Not Acceptable)				
										
				84 (City		Т	85 Zip (Code	
					•		FL			
11. Pursuant office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State	02 and 607 1508, Flori da Sta tul ⊧of Florida. Such chan ge wa s a	es, the at authorized	oove-na 3 by th	amed corp e corporati	oration submits this statement for the pulion's board of directors. I hereby accept	rpose of ch the appoin	ianging it itment as	ts registered registered	
office or registered agent, or both, in the State of Foreign authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am language with a state of foreign as a compared to the corporation of th										
SIGNATURE	Signature typics or printed name of registered ag	7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		-		ed when reinstating)	DATE	10		
12.		D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE				
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CITY-ST-ZIP				IY-ST-70					ļ	
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14. Thereby 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 an attachment with an address.