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

•	MENT # P9500 A HOLDINGS, INC.	0029669 (5)		: (1818 1818 8ULP 8188 888 1818 1818
Principal Place of Business Mailing Address					
877 EXECUTIVE CENTER DR W SUITE 303 ST PETERSBURG FL 33702		877 EXECUTIVE CENTER DR W SUITE 303 ST PETERSBURG FL 33702		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
. 6: :: : : : 6				04/14/1995 4. FEI Number	·
	lace of Business	2a. Mailing Address			Applied For
Suite, Apt.	# etc	26 Suite, Apt. #, etc.		65-0573668	Not Applicable \$8.75 Additional
22	n, 5to.	27		5. Certificate of Status Desired	Fee Required
City & State	9	City & State	14.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	current year Intangible
24	25	29	30	Personal Property Tax due June 30.	X Yes ☐ No
	9. Name and Address of Curr SCARA, ERNEST L	ent Registered Agent	81 Name	10, Name and Address of New Register	ed Agent
SU	PETERSBURG FL 33702		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
			84 City		85 Zip Code
office or r agent. I a SIGNATURE	egistered agent, or both, in the Sta m familiar with, and accept the obl Stgnature, typed or printed name of registered a	te of Florida, Such change war gations of, Section 607.0505, I	s authorized by the corpora Florida Statutes. DIE Registered Agent signature requ	rporation submits this statement for the purposition's board of directors. I hereby accept the	appointment as registered
12.	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	DPT	☐ DELETE	1.1 TITLE		Change Addition
NAME	HUGHES, ROY		1.2 NAME		
STREET ADDRESS	10035 GULF BOULEVARD		1.3 STREET ADDRESS		
CITY-ST-ZIP	TRASURE ISLAND FL 33700		1.4 CITY-ST-ZIP		The Figure
TITLE	DVPS	DELETE	2.1 TITLE		Change Addition
NAME	HUGHES, JEAN		2.2 NAME		
STREET ADDRESS	10035 GULF BOULEVARD		2 3 STREET ADDRESS		
CITY-ST-ZIP	TRASURE ISLAND FL 3370	DELETE	2. 4 CITY+ST-ZIP 3.1 TITLE		Change Addition
TITLE					CT Origings CT MODITION
NAME CAREER ADODESC			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-SY-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME		5	4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY+ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME		_ ···· -	5.2 NAME		<u> </u>
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE	·	DELETE	6.1 TITLE		Change Addition
NAME			62 NAME		

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 frue 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 eceiver 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 of plant attachment with an address.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

JOHN ROY HUELES Par

2/19/98

(813) 360 1659.

FILED

Apr 01 1998 8:00am

Secretary of State