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 # P95000031176 (7)

BERTRUM & COMPANY, INC.

FILED Jan 28 1998 8:00am Secretary of State

Principal Place of Business	Mailing Address			SHEMA DIARAN ISANG TANDAN ATEN IMBAT
2459 CHENEY HWY.	2459 CHENEY HWY.			
TITUSVILLE FL 32780 TITUSVILLE FL 32780 US US				
			DO NOT WRITE IN TH	S SPACE
			3. Date Incorporated or Qualified	
2. Principal Place of Business	On Mailine Address		04/17/1995 4. FEI Number	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	2a. Mailing Address			Applied For
Suite Apt #, etc.	Suite, Apt. #, etc.		59-3312298	Not Applicable
22	27 Suite, Apr. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		S. Significa Compaign Financing	
23	28		6. 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	
24 25	29	30	Personal Property Tax due June 30.	Yes No
9. Name and Address of Curren			10. Name and Address of New Registere	
FITZWATER, ANDREA E		81 Name		
1645 ECHO DR.		82 Street Addr	roon (B.O. Boy Number Is Not Assessed Is)	
TITUSVILLE FL 32780		82 Street Addr	ress (P.O. Box Number Is Not Acceptable)	
THOU WELL I'E SET SE		83		,
		84 City	F	85 Zip Code
11. Pursuant to the provisions of Sections 607.0500	2 and 607,1508. Florida Sta	tutes, the above-named corn		
 Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State agent. I am familiar with, and accept the obliga 	of Florida. Such change wa	as authorized by the corporati	tion's board of directors. I hereby accept the a	ppointment as registered
	utions of, Section 607.0505,	Fiorida Statutes.		
SIGNATURE Signature, typed or printed name of registered ager	nt and title it applicable	NOTE; Registered Agent signature require	red when reinstating) DATE	
12. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE D	DELETE	1,1 TITLE		Change Addition
NAME FITZWATER, RHUEL		1.2 NAME		ļ
STREET ADDRESS 1602 M. FITZWATER		1.3 STREET ADDRESS		
CITY-ST-ZIP TITUSVILLE FL 32780		1,4 CITY-ST-ZIP		+
TITLE P	DELETE	2.1 TITLE		Change Addition
NAME FITZWATER, CARROLL L JR.		2.2 NAME		
STREET ADDRESS 1645 ECHO DR.		2 3 STREET ADDRESS		
CITY-ST-ZIP TIRUSVILLE FL 32780		2. 4 CITY - ST - ZIP		
TITLE ST	DELETE	3.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME FITZWATER, ANDREA		3.2 NAME		
STREET ADDRESS 1645 ECHO DR.		3.3 STREET ADDRESS		
CITY-ST-ZIP TITUSVILLE FL		3.4. CITY-ST-ZIP		
TITLE	DELETE	4.1 TITLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS				
CITY-ST-ZIP		4.3 STREET ADDRESS		
TITLE	☐ DELETE	4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE		☐ Change ☐ Addition
	DELETE	4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME	DELETE	4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS	☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS		☐ Change ☐ Addition
TITLE NAME	☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE	_	4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-SI-ZIP	_	4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 6.1 TITLE		

14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.