## 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

## **FILED** Mar 20 1998 8:00am Secretary of State

1	MENT # P9500( NTERPRISES, INC.	)035670 (5)	)		WAN BINDA BINDI NABIN ABIN ABIN
Principal Plac	ce of Business	Mailing Address			
788 PARK SHORE DR H-32 788 PARK SHORE DR H-3 NAPLES FL 34103 NAPLES FL 34103			1-32		
1				DO NOT WRITE IN THI	S SPACE
[				3. Date Incorporated or Qualified	
2. Principal F	Place of Business	2a. Mailing Address		05/02/1995 4. FEI Number	Applied For
21		26		65-0579297	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22	27			5. Certificate of Status Desired	Fee Required
City & State		City & State		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 o	
24	25	29	30	Personal Property Tax due June 30.	Yes No
ļ	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Registere	d Agent
RUBIN, RUBERTA			81 Name		
788 PARK SHORE DR H-32 NAPLES FL 33940				eet Address (P.O. Box Number is Not Acceptable)	
			63		
			84 City	F	85 Zip Code
office or i agent. I a	to the provisions of Sections 607.050 registered agont, or both, in the State am familiar with, and accept the obligations.	of Florida Such change was	authorized by the corpor	rporation submits this statement for the purpose ation's board of directors. I hereby accept the a	of changing its registered pointment as registered
SIGNATURE	Signature, typod or printed name of registered age	oil and title if applicable (NC	TE. Registered Agent signature req	juired when reinstating) DATE	
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	VTD	DELETE	1,1 TITLE		☐ Change ☐ Addition
NAME	RUBIN, ROBERTA		1,2 NAME		
STREET ADDRESS	788 PARK SHORE DR H-32		1.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL	Descri	1.4 CITY-ST-ZIP		I Character I I Laterian
TITLE	MICHIADOMOVI DODEDY	DELETE	2.1 TIFLE		Change L. Addition
NAME STREET ADDRESS	NIEWIADOMSKI, ROBERT 788 PARK SHORE DR H-32		2.2 NAME 2.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL 34103		2.4 CITY-ST-ZIP	•	
TITLE	101 020 / 5 0 1 100	DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		}
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELĒTE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		1
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY - ST - ZIP		Channa Addis
TITLE		☐ DECEIE	5.1 TITLE		Change Addition
NAME STREET ADDRESS			5.2 NAME 5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		ļ
TITLE		☐ DELET <b>E</b>	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	; 		6.4 CITY-ST-ZIP		

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 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.