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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

ANN	PROFIT RPORATION UAL REPORT 1998	FLORIDA DEPART Sandra B. Secretary DIVISION OF CO	Mortham of State	Jan 16 1998 Secretary		
DOCU 1. Corporation	MENT # P9500	0041645 (9)				
	MANAGEMENT INC.			1		
·)		
Principal Plac	ce of Business	Mailing Address			 	
2451 ROBER		2451 ROBERTA LANE		ļ		
CLEARWATER FL 34624 CLEARWATER FL 34624-31C			С	DO NOT WRITE IN THIS SPACE		
03		03		3. Data Incorporated or Qualified		
Bullion of the	70	Table Address		05/26/1995		
	Place of Business V. HIWSBORDIGU AVE	2a. Mailing Address 26 P.O. BO 215	07	4. FEI Number 59-3318488	Applied For Not Applicable	
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27		<u> </u>	Fee Required	
23 THUP	4 fl	City & State TAMPA [L		Election Campalgn Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 3361	Country 25 VST	Zg 33622 3	Country O USA	This corporation owes or has paid Personal Property Tax due June 3		
	9. Name and Address of Curren	[-0]		10. Name and Address of New Reg		
PAUL, WILLIAM R (81 Name						
			ress (P.O. Box Number is Not Acceptable	e)		
TAMPA FL 33602						
			84 City		FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstaling) DATE						
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICE	 /\	
TITLE	D	DELETE	1.1 TITLE		☐ Change ☐ Addition ♀	
NAME	MOSS, HOWARD		1.2 NAME		2	
STREET ADDRESS	2451 ROBERTA LANE		1.3 STREET ADDRESS		2000	
CITY-ST-ZIP	CLEARWATER FL	DELETE	1.4 CITY - ST - ZIP		Change Addition	
TITLE NAME		T DETELE	2.1 TITLE 2.2 NAME		C civilde C vocitori	
STREET ADORESS		,	2.3 STREET ADDRESS		ķ	
CITY-ST-ZIP	_		2. 4 CITY - ST - ZIP			
TITLE		DELETE	3.1 TITLE		Change Addition	
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STREET ADDRESS			3.3 STREET ADDRESS			
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STREET ADDRESS			4.3 STREET ADDRESS)	
CITY-ST-ZIP			4.4 CITY-ST-ZIP		, -u	
TITLE		☐ DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS		į	5.3 STREET ADDRESS			
CITY-ST-ZIP TITLE	·	DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition	
NAME I			6.2 NAME		El orando El vagaron	
STREET ADDRESS			6.3 STREET ADDRESS			

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