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 # P95000051582 (1)

FINANCIAL & BUSINESS ASSOCIATES. INC.

FILED Apr 28 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							OTAL BONN BOND ON	(OL 1190) B3101 H	
701 BOUGH AVENUE 701 BOUGH AVENUE									
CLEARWATER FL 34620 CLEARWATER FL 34620									
					<u> </u>	DO NOT WRITE IN THIS SPACE			
}					3	 Date Incorporated or Quali 07/03/1995 	fied		
2. Principal P	ace of Business	2a. Mailing Address			4	, FEI Number		Α	pplied For
21 MOI DOUGH NU 26						65-0593264		N	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			6	6. Certificate of Status Desire	d 🔲		Additional equired
City & State City & State					6	. Election Campaign Financi	na	\$5.00	May Be
23 () 5 7	evater th	28				Trust Fund Contribution			to Fees
zip 24 ろう7	Country	Zip	Country	/	8	. This corporation owes or h	as paid the cu	rrent year in	langible
24 001	60 25 MINERAS		10			Personal Property Tax due			J No
	y, Name and Address of Current		81	I NI	10). Name and Address of Ne	w Registered	Agent	
,	E LAW FIRM OF LAWRENCE J S	PIEGEL CHRTD	81	Name					
343 ALMERIA AVENUE				Street Ad	ddress (P.O. Box Number is Not Acc	eptable)		
CORAL GABLES FL 33134									
			83						
			84	City			FL	85 Zip	Code
44 Purcuent I	to the provisions of Sections 607.0502	and 607 1508. Florida Statutos	the above	o-named c	ornorati	on submite this statement for			ite registered
office or re	egistered agent, or both, in the State of familiar with, and accept the obligations.	of Florida. Such change was au	thorized by	y the corpo	oration's	board of directors. I hereby	accept the ap	pointment as	registered
SIGNATURE	Stonature, typed or punited name of registered agen								
12.	Signature, typed or punted name of registered agen OFFICERS AND		13.	ent signature re	equireo whe	ADDITIONS/CHANGES TO	DATE	D DIRECTO	BC IN 12
TITLE	PSD	DELETE	1.1 TITLE			ADDITIONOJO I ANGLO TO 1	JITIOLIIO AIN	Change	Addition
NAME	JESKEY, JOSEPH	-	1 2 NAME						
STREET ADDRESS	701 BOUGH AVENUE		1.3 STREET	ADDRESS					ĺ
CITY-ST-ZIP	CLEARWATER FL 34620		1.4 CITY - S	- 1					
TITLE	TO	☐ DELETE	2 1 TITLE					Change	Addition
NAME	JESKEY, ILLONA		2.2 NAME						
STREET ADDRESS	701 BOUGH AVENUE		2.3 STREET	ADDRESS					ſ
CITY-ST-ZIP	CLEARWATER FL 34620		2. 4 CITY -	ST - ZIP		·	#*·		
TITLE		☐ DELETE	3.1 TITLE					Change	Addition
NAME			3.2 NAME	- 1					
STREET ADDRESS			3.3 STREET	ADDRESS					
CITY-ST-ZIP			3.4. CITY-1	ST-ZIP					
TITLE		DELETE	4.1 TITLE					Change	Addition
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREET	ADDRESS					
CITY-ST-ZIP			4.4 CITY - S	1-ZIP				1 0	
TITLE		L DELETE	5.1 TITLE					Change	Addition
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREET						
CITY-ST-ZIP		DELETE	5.4 CHY-S	ST - ZIP				Obass	Addition
TITLE		☐ DELETE	6.1 TITLE	-				☐ Change	Addition
NAME			62 NAME						
STREET ADDRESS			63 STREET	i					
CITY-ST-ZIP			64 CHY-S	IT- 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.