## 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

1.	PASHA		PRISES, INC	•	4742 (8	)						
1 .	1910 DREW STREET CLEARWATER FL 34625				10 DREW STREET				,			
9					CLEARWATER FL 34625			DO NOT WRITE IN THIS SPACE				
l									3. Date Incorporated or Qualific		IIO DI MOL	
									07/13/1995			
	Principal P	incipal Place of Business			2a. Mailing Address			4. FEI Number		A	pplied For	
21		And Hart			26			59-3334906		N	ot Applicable	
22	Suite, Apt.	#, etc.		<b>⊢</b> ¬	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional	
331	City & State				City & State			A Floring Council St. 1			equired	
23				}-··ı	28			6. Election Campaign Financing Trust Fund Contribution	, 1		May Be to Fees	
	Zip		Country	·	Zip	Count	try		8. This corporation owes or has	paid the		
24	33765 [25]			29	. da 1				Personal Property Tax due J			] No
<u> </u>		<del></del> -		of Current Regist	ered Agent		. T		10. Name and Address of New	Register	ed Agent	
		Ler, Den				8	il Na	ame				
	1910 DREW STREET CLEARWATER FL 94625 33765					8	2 Si	eet Addi	ress (P.O. Box Number is Not Accer	table)		
	CLI	EARWATE	R FL 94625 3	3765		В	3					
						Ĺ						
						8	4 Ci	ly		F	85 Zip	Code
11	, Pursuant I	to the provis	sions of Sections	607.0502 and 60	7.1508, Florida State	ites, the abo	ve-na	ned corp	poration submits this statement for the			ts registered
	agent. I a	egi <b>ste</b> red aç m f <b>am</b> iliar w	gent, or both, in rith, and accept :	the State of Floridi the obligations of,	a. Such change was Section 607.0505, F	authorized l Iorida Statut	by the es.	corporat	tion's board of directors. I hereby ac	cept the a	appointment as	registered
SI	GNATURE			•								
	Signature Types or priviled national registered agent and filled apply able  12. OF LICERS AND DIRECTORS					III - Registered Agent signature requir				DATE		·····
101		PSD	OFFIC	ERS AND DIREC	DELETE	13. 1.1 TITLE	<del></del>		ADDITIONS/CHANGES TO OF	FICERS A	ND DIRECTOR Change	RS IN 12 Addition
NA	ľ		, DENNIS W		EL OCCUR	1.2 NAM					L Grange	Audaron
STF	REET ADDRESS		REW STREET			1.3 STRE		FSS				
CIT	Y-ST-ZIP		NATER FL			1.4 CiTY						
TIT	LE .	· ·			☐ DELETE	2.1 TITLE					Change	Addition
NAN	ME					2.2 NAM	E					
STR	REET ADDRESS					2.3 STRE	et addr	ESS				
	Y-ST-ZIP		· <del></del>		DELETE	2. 4 CITY		<u> </u>				
TITL					☐ DELETE	3.1 TITLE 3.2 NAME					L Change	Addition
ļ	EET ADDRESS					3.3 STREE		rce				
	Y-ST-ZIP					3.4. CITY						
TITL					DELETE	4.1 TITLE					Change	☐ Addition
NAN	AE .					4. 2 NAM	F				_	
SŢR	EET ADDRESS					4.3 STREE	et addr	ESS				
	(-ST-ZIP	<del>.,</del>	·			4.4 CITY-						
TITL					DELETE	5.1 TITLE					Change	Addition
NAM						5.2 NAME						
	EET ADORESS					5.3 STREE		SS				
TITL	(-ST-ZIP				DELETE	5.4 CITY- 6.1 TITLE					Change	Addition
NAM						6.2 NAME					— Grange	L. AUGIOUI
	EET ADDRESS					6.3 STREE		ss				
						1 200,710						

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 f 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 all attachment with an address.

**FILED** 

May 14 1998 8:00am

Secretary of State