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

ì .	MENT # P95000 INVESTMENTS, INC.	058236 (7)			111 1210 1010 1010 1111 1111 1111 1111
Principal Plac	e of Business	Mailing Address		{	HADA ARTAR HADAR TAKAR BIKA KRITA
		1680 OAKS BLVD.			
1680 OAKS BLVD. 1680 OAKS BLVD. NAPLES FL 33999 NAPLES FL 33999					
				DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified	
9 Principal P	Place of Business	I de Mailing Address		07/26/1995 4. FEI Number	T IA CAR
21 Principal F	ace of business	28. Mailing Address 72	70385	65-0595422	Applied For Not Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.			\$8.75 Additional
22	, 23-	27		5. Certificate of Status Desired	Fee Required
City & State	θ	City & State	ر سو	6. Election Campaign Financing	\$5.00 May Be
23		28 NAPLES	<i>FL</i>	Trust Fund Contribution	Added to Fees
Zip 2//	Country	Zip	Country	8. This corporation owes or has paid the ci	
24 341			10 45A	Personal Property Tax due June 30.	Yes No
· · · · · · · · · · · · · · · · · · ·	g, Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registered	Agent
SMITH, JERRY R			Name		
1680 OAKS BLVD.			82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
NA	PLES FL 33999		83		
			84 City		85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, t			the above-named corp	oration submits this statement for the purpose	of changing its registered
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		AUDIT I	5	ed when reinstaling) DATE	
12.	Signature, typed or printed name of registered agent OFFICERS AND		Registered Agent signature require 13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
THILE	D	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	SMITH, JERRY R		1.2 NAME		
STREET ADDRESS	1680 OAKS BLVD.		1.3 STREET ADDRESS		
CITY-ST-ZIP	NAPLES FL 33999		1.4 CITY-ST-ZIP		
TITLE		☐ DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME		L_ petere	4. 2 NAME		Change Change
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP	•		4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		Į
STREET ADDRESS			5.3 STREET ADDRESS		ļ
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELET E	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		ì
STREET ADDRESS			6.3 STREET ADDRESS		

14. Thereby 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.

6.4 CITY-ST-ZIP

FILED

Feb 20 1998 8:00am

Secretary of State