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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Jan 22 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

		·····				
DOCUI	MENT # P9500	00069322 (2	2)			
•	ESS FINANCIAL SERVICES	S. INC.	-			
POUNT		0) 1110.			4 (485)(484 (184 (481 4814) 4814) 48144 48144 48144 48144 48144	I ë 10100 11110 111010 1101 1101
Principal Place of Business		Mailing Address			IB 18188 1419 14848 4181 1881	
11983 N. TAMIAMI TRAIL		2725 SAILORS WAY				
SUITE 148 NAPLES FL 34110		NAPLES FL 33942		DO NOT WRITE IN THIS	SPACE	
US	MILIT				3. Date Incorporated or Qualified	
•••					09/08/1995	
2. Principal Place of Business		2a. Mailing Address			4. FEI Number	Applied For
21		26		65-0607734	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		6 Flories Occasion Financian		
23		28		6. 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 cur	
24	25	29	30		Personal Property Tax due June 30.	Yes 🗌 No
	g. Name and Address of Curr	rent Registered Agent			10. Name and Address of New Registered	Agent
	E LAW FIRM OF LAWRENCE J	J SPIEGEL CHRTD	81	Name		j
343 ALMERIA AVENUE			82	Street Add	dress (P.O. Box Number is Not Acceptable)	
CO	RAL GABLES FL 33134		83			
			0.0			
			84	City	FL	85 Zip Code
11. Pursuant t	to the provisions of Sections 607.0	502 and 607.1508. Florida Sta	itutes, the abov	/e-named cor		changing its registered
office or re	egistered agent, or both, in the Stam familiar with, and accept the ob-	ate of Florida. Such change wa	as authorized b	y the corpora	rporation submits this statement for the purpose o ation's board of directors. I hereby accept the app	pointment as registered
SIGNATURE	in ignimal with and accept the ob-	ngations of coction corrector,	, londa Olaibio			
SIGNATURE	Signiflure, typed or printed name of registered		NOTE: Registered Ag	pent signature requ	uired when reinstating) DATE	
12.		AND DIRECTORS	13.	··-	ADDITIONS/CHANGES TO OFFICERS AND	
TITLE	PSTD David, Robert J	☐ DELETE	1.1 TITLE	ľ		Change Addition
NAME	2725 SAILORS WAY		1.2 NAME	T ADDRESS		}
STREET ADDRESS CITY-ST-ZIP	NAPLES FL 33942		1.4 CITY-			
TITLE	TWI DEO I E VOOTE	DELETE	2.1 TITLE	31.51		Change Addition
NAME			2.2 NAME	ļ		
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			2. 4 CITY+	ST-ZIP		
TITLE		DELETE	3.1 TITLE			☐ Change ☐ Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREE	1 ADDRESS		İ
CITY-ST-ZIP			3.4. CITY-	ST-ZIP		
TITLE		DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAME		•	
STREET ADDRESS				1 ADDRESS		
CiTY-ST-ZIP		DELETE	4.4 CiTY+ :	51-ZIP		Change Addition
TITLE NAME		E) otter	5.1 TITLE 5.2 NAME			C cusuffe C variation
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			5.4 City -			
TITLE		DELETE	6.1 TITLE	01 211		☐ Change ☐ Addition
NAME			6.2 NAME			
STREET ADDRESS				T ADDRESS		
CITY OF 710			64 CATA)		

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 chapted, or on an attachment with an address.

ATURE FOR AXA - A RELEAST X MICH 1-12-98 GUL 594-1951