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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

1. Corporation Name

FILED Feb 05 1998 8:00am Secretary of State

Security Capital Corporation													
Principal Plac	e of Busines	şs	Mailing	Mailing Address 1605 MAIN ST SUITE 1004				-	 		11 0		
1605 MAIN S SUITE 1004			SUITE					DO NOT WRITE IN THIS COLOR					
SARASOTA FL 34236				SARASOTA FL 34238 US				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified					
00			00					09/18/1995					
2. Principal P	lace of Busi	ness	2a. Maili	2a. Mailing Address				4. FEI Number	· · · · · · · · · · · · · · · · · · ·	Δ	oplied For	-	
21			 					65-0604075 Not Applii				Η,	
Suite, Apt.	#, etc.	····		Suite, Apt. #, etc.					\$8		Additional	1	
22			27	27				5. Certificate of Status Desired			equired		
City & Stat	е		City	& State				6. Election Campaign Financing	\$	5.00	May Be	٦	
23			28					Trust Fund Contribution		Added	to Fees		
Zip		Country	Zip					This corporation owes or has paid the current year Intangible					
24	0 Name	25 and Address of Curr	29		30			Personal Properly Tax due June 3			No.	4	
100			ent nagistered	Мони	81	Name	n	10. Name and Address of New Regi	stered Agen	τ		4	
IMA 404	YO, TODD	TOPET AUTO 446	للممي		Ľ	INDITE							
		TREET SUITE 1108	1007		82	Stree	t Addres	ss (P.O. Box Number is Not Acceptable)			1	
SA	rasota f	L 34230			B3							4	
					84	City			FL 85	Zip	Code	1	
11. Pursuant office or r agent. I a	to the provis egistered ag m familiar w	sions of Se ctions 607.08 gent, or b oth, in the Sta lith, and a ccept the obli	502 and 607.150 to of Florida. Su igations of, Sect	08, Florida Statute ch change was a tion 607,0505, Flo	es, the abov uthorized by rida Statute	J e-name y the co s.	d corpo rporatio	ration submits this statement for the pur n's board of directors. I hereby accept		I ging it ent as	s registored registered		
SIGNATURE	Signature, typed	or printed name of registered a	agent and title it applic	able (NOTE	Registered Age	on signatu	re required	when reinstating)	DATE				
12.			ND DIRECTORS		13.	zan engiripite		ADDITIONS/CHANGES TO OFFICE		CTOR	S IN 12	- [
TITLE	D	<u> </u>		DELETE	1.1 TITLE		P,	5, T		hange	Addition	13	
NAME	MAYO,	TODD L			1.2 NAME		''				•	1	
STREET ADORESS		AIN ST SUITE 1004			1.3 STREET	ADDRESS	1					15	
CITY-ST-ZIP	SARAS(OTA FL	 		1.4 City - S	1 - ZIP						3	
TITLE	D			DETELE	2.1 TITLE					hange	Addition	1	
NAME		S, RICHARD L	•		2.2 NAME							ļ	
STREET ADDRESS		AIN ST SUITE 1004			2.3 STREET	ADDRESS							
CITY - ST - ZIP	SARAS	DTA FL		55,556	2.4 CITY-	ST-ZIP						1	
TITLE				DELETE	3 1 TITLE				□c	hange	Addition		
NAME OVEREST ADDRESS					3.2 NAME		1						
STREET ADDRESS					3.3 STREET								
CITY-ST-ZIP TITLE	/			DELETE	3.4. CHY-5	SI - ZIP	┼		c	hanco	Addition	4	
NAME					4 2 NAME				_ ·	nanye	LT VARIEN		
STREET ADDRESS					4.3 STREET	ADDOCCC							
CITY-ST-ZIP					4.4 CITY-S								
TITLE				DELETE	5.1 TITLE	1 - 41F	 		По	hange	Addition	1	
NAME				.—	5.2 NAME			200002423	ลเกก็ต้				
STREET ADDRESS						5.3 STREET ADDRESS		-02/06/9801002	029				
CITY-ST-ZIP					5.4 CITY-S			200002423 -02/06/9801002 ***150.00					
TITLE				DELETE	6.1 TITLE		†			nange	Addition	1	
NAME					6.2 NAME				•	$\hat{\wedge}$	6		
STREET ADDRESS					6.3 STREET	ADDRESS				'\!		1	
CITY-ST-ZIP					64 CHY-S	I - 71P				\mathcal{I}	XI.		

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 suppliemental annual priorit 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 of rustee 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 attacturent with an address. 941