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

CORPORATION **ANNUAL REPORT** 

1998



Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT** # P95000083408 (1)

PROMOTIONAL PREMIUMS, INC.

Principal Place of Business

Mailing Address

9403 AZALEA RIDGE CIR

3420 W PALMIRA AVE TAMPA FL 33629

Feb 11 1998 8:00am Secretary of State



US	<b>~-</b> .	Inmin 16 90060				DO NOT WRITE IN THIS SPACE					
						3. Date I	ncorporated or Q	ualified	•		
								1/1995			
2. Principal Place of Business			2a. Mailing Address 26 9403 AZALEA ROG CIR				4. FEI Nu			Ar	plied For
21							65	0605499		<del></del>	t Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certific	cate of Status Des	ired 🗆	\$8.75	
City & State			Critic P. Stollo				ļ			Fee Re	·
<del></del>			City & State					on Campaign Fina		\$5.00	
<b>23</b> ] Zip	Country	28	70		Country			und Contribution		Added	
24	25	29 33647 30				<b>S</b> .		orporation owes o hal Property Tax o		_ ′ -	angible No
24	g. Name and Address of Curren	1.7.71 7	red Agent	301	1			and Address of			3110
BROWNING, FRED						Name	101				
3420 W PALMIRA AVE											
TAMPA FL 33629			82 Street Add			Street Addre	ss (P.O. Box	Number is Not A	ccepable)	Cik	
1750	MIN I E 00020				83			21,231	70,000		
					Щ						
					84	City TA	MPA	•	FL	85 Zip	29 47
11. Pursuant t	to the provisions of Sections 607 050	2 and 607	1508, Florida Statut	tes, the a	bove-			its this statement		f changing it	s registered
office or re	egistered agent, or both, in the State m familiar with, and access the obliga	of Horida	Such change was	authorize	d by t	he corporatio	on's board o	f directors. I heret	by accept the app	pointment as	registered
		ingis oi, c	section 607,000s, Pi FLETO	King Sia	iules. M/A	11N6.	- 225	7	2/2/	OR	
SIGNATURE	Signature, typed or ported narroent resistored rigo	of and to g				signature required	d when reinstatin	g)	DATE	70	
12.	OFFICERS ANI	نن DIRE أن	ORS	13.			ADDITIO	ONS/CHANGES T	O OFFICERS AN	DIRECTOR	IS IN 12
TITLE	P		DELETE	1.1 Tr	TLE					Change	Addition
NAME	Browning, Fred			1.2 NA							
STREET ADDRESS	9403 AZALEA RIDGE CIR		1.3 !		TAEET AL	odress					
CITY-ST-ZIP	TAMPA FL	AMPA FL 1,4		1.4 CI	ITY-ST-	ZIP					
TITLE		DILETE 2.11		2.1 1	TLE					Change	Addition
NAME				2.2 N	AME						
STREET ADDRESS			2.3 \$		TREET AL	DDRESS					;
CITY-ST-ZIP			2		2 4 CITY-ST-ZIP						ļ
TETLE			☐ DELETE	3 1 71	TLE			<u>-</u>	•	Change	☐ Addition
NAME				3 2 N	AME						
STREET ADDRESS				3.3 \$1	TREET AL	DORESS					
CITY-ST-ZIP				34 C	ITY-ST-	ZIP					
TETLE			☐ DELETE	4.1 (1	TLE					Change	☐ Addition
NAME				4 2 N	IAME						
STREET ADDRESS				4.3 51	TREET AC	DORESS					
CITY-ST-ZIP				4.4 CI	ITY-ST-	ZIP					
TITLE			DELETE	51TI	TLE		L++			Change	☐ Addition
NAME				52 N/	AME	- 1					
STREET ADDRESS				5351	TREET AL	DDAESS					ļ
CITY - ST - ZIP				5.4 CI	TY-ST-	ZIP					
TITLE			DELETE	61 Tr						Change	☐ Addition
NAME				62 N/	AME						
STREET ADDRESS				6351	IREFT AC	DDRESS					
CITY-ST-ZIP					TY-ST-	I					
	actify that the information supplied w	th this files	va duos not qualify to				action 110 C	7/2)(i) Florida St	stutos. I further or	ortify that the	information

Indicated on this annual report or supplied with his bind duality of the exemptor stated in section 19.07(5)(f), Florida Statutes. Turner cettify that the information indicated on this annual report of supplemental annual report is true and accurate and that my signature shalf have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or frustree 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. LES BOONWING