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. Corporation			OOB531 RY COMPANY	• •	ı			AANA AANA AWAA MAA K	
Principal Place	e of Business	Mailing Ade	Mailing Address				10101 18101 BHOD 111 5 1 H	OU SHE PARI	
15650 80 TA FT. MYERS F US		15650 SO FT. MYERS	15650 SO TAMIAMI TRAIL FT. MYERS FL 33908 US			DO NOT WRITE IN THIS SPACE			
55			•				3. Date Incorporated or Qualified		
							11/06/1995		
<u> </u>	lace of Business	2a. Mailing	Address			4. FEI Number	-	pplied For	
21	4 -1-	26	Suite, Apt. #, etc.			65-0628102		lot Applicable	
Suite, Apt.	#, etc	<u> </u>	27.			5. Certificate of Status Desired	T	Additional lequired	
City & Stat	le		City & State			6. Election Campaign Financing		May Be	
23			28					to Fees	
Zip	Country		Zip		Country	i	8. This corporation owes or has paid		
24 25			29				Personal Property Tax due June 30. Yes No		
9, Name and Address of Current Registered Agent						Name	10. Name and Address of New Regis	Herea Agent	
PEARSON, BRIAN									
	22 SE 8 ST		82 Str			dress (P.O. Box Number is Not Acceptable))		
CAPE CORAL FL 33990						<u></u>			
					83				
					84	City		FL 65 Zip	Code
11. Pursuant	to the provisions o	f Sections 607.0	502 and 607, 1508,	Florida Statul	tes, the abov	e-named co	prporation submits this statement for the puration's board of directors. I hereby accept t		its registered
agent La	ım familiar with, an	d accept the obl	igations of, Section	607.0505, FI	orida Statute	y ine corpor s.	alion's board of directors. Thereby accept t	пе арропилен аз	, redistered
SIGNATURE									
12.	Signature, typed or printed name of registered age 12. OFFICERS AN						quired when reinstaling) ADDITIONS/CHANGES TO OFFICER	DATE PS AND DIRECTOR	BS IN 12
TITLE	D	OTTIONS /		DELETE	1.1 TITLE		ADDITIONS CHANGES TO OFFICE	Change	Addition
NAME	PEARSON, B	RIAN J			1.2 NAME	!			·
STREET ADDRESS	2322 SE 8 S		1		ADDRESS			ļ	
CITY - ST - ZIP	CAPE CORAL	FL			1.4 CITY-5	ST - 21P		_	
TITLE	D			DELETE	21 TITLE			Change	☐ Addition
NAME	PEARSON, S			2.		Ī			Ì
STREET ADDRESS	2322 SE 8 S				2.3 STREET	ADDRESS			
CITY-ST-ZIP	CAPE CORAL	<u>. FL</u>		051575	2. 4 CITY -	ST-ZIP			4 2 2 3 2 2
TITLE	D DELETE PEARSON, DALE J				3.1 TITLE			☐ Change	Addition
NAME DEDCET ADDRESS					3.2 NAME	***********			i
STREET ADDRESS	2322 SE 8 ST CAPE CORAL	-			3.3 STREET				
CITY-ST-ZIP TITLE	CATE CURAL	<u>. [b</u>	·	DELETE	3.4. CITY - 4.1 TITLE	51 - ZIP		Change	Addition
NAME			•		4. 2 NAME				
STREET ADDRESS					4.3 STREET	ADDRESS			
CITY-ST-ZIP					4.4 CITY-S	T I			
TITLE				DELETE	5.1 TITLE			☐ Change	Addition
NAME					5.2 NAME	Į			Į
STREET ADDRESS					5.3 STREET	ADDRESS			
CITY-ST-ZIP					5.4 CITY - S	IT-ZIP			
TITLE			7	DELETE	6 1 TITLE			☐ Change	☐ Addition
NAME					6.2 NAME				ł
STREET ADDRESS				6.3 STREET	ADDRESS			j	
CITY - ST - 71P	1 .				640074-9	T. 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 I am an officer or director of the corporation or the receiptr 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 or an attainment with an address.

SIGNATURE:

FILED

May 01 1998 8:00am

Secretary of State