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

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000092722 (4)

	9TH STREET INVESTMENTS, INC.	, ,				
Principal Place of Business Mailing Address					1 10011401 1960 19701 97114 98711 98711 98714 98710 19410 19	OFF CORFED HIGHER SHOP RADIE
1262 N. 87H ST., N. 8T. PETERSBURG FL 33705		1262 N. 9TH ST., N. ST. PETERSBURG FL 33705		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified 12/06/1995	
2.	Principal Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-3352183	Not Applicable
22	Suite, Apt. #, etc. Suite, Apt. #, etc. 27					\$8.75 Additional Fee Required
23	City & State	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24	Zip Country	Zip 3	Country		8. This corporation owes or has paid the curren Personal Property Tax due June 30.	· — •
g. Name and Address of Current Registered Agent				10, Name and Address of New Registered Agent		
'	SEAMAN, SCOTT W		81	Name		
1262 N. 9TH ST., N. ST. PETERSBURG FL 33705			82	82 Street Address (P.O. Box Number is Not Acceptable)		
	- · · · · = - · · · · · · · · · · · · ·		83			
			84	City	. FL ^t	35 Zip Code
11	Pursuant to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	, the above	-named corpo	oration submits this statement for the purpose of ch	anging its registered

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 Signature, typied or printed name of registered agent and titre if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. ☐ DELETË TITLE 1.1 TITLE Addition ☐ Change SEAMAN, SCOTT W NAME 1.2 NAME 1396 50TH AVE., NE STREET ADDRESS 1.3 STREET ADDRESS ST. PETERSBURG FL 33703 CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE Change Addition NAME BRAUN, RONALD W 2.2 NAME 1163 SNELL ISLE BLVD., NE STREET ADDRESS 2.3 STREET ADDRESS ST. PETERSBURG FL 33704 CITY-ST-ZIP 2. 4 City-St-ZiP DELETE TITLE 3.1 TITLE Change ☐ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE Change 4.1 TITLE ■ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETÉ Change 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. 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 changed on an attachment with an address.

6.4 CITY-ST-ZIP

alela

813/821-6601

FILED

Mar 13 1998 8:00am

Secretary of State