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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000093270 (3)

FILED Jan 28 1998 8:00am Secretary of State

| Principal Place of Business 18 10 GREBS ST 1 | BROOK | (LYN BO) | YS, INC. | | | | | | | |
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| Principal Place of Business 2a Mailing Address 4. FEI Number Applied 65-663253 Not April Applied 55-6053253 Not April Applied | | | | | | | | | The state of the s | |
| Sulic, Apt. #, etc. | 2. Principal Place of Business | | | | 2a. Mailing Address | | | | | ┪ |
| Solito, Apt #, etc. Solito, Apt #, etc. | | | | | 26 | | | | 65-0623253 Not Applicable | .e |
| City & State | | | | | <u> </u> | | | | \$8.75 Additional | ٦ |
| 28 29 20 20 30 30 30 30 30 30 | 22 | | | | | | | | Fee Required | ╛ |
| Zip | City & State | | | | — ¬ ' | | | | 7 7 7 7 | |
| Personal Property Tax due June 9.0 Yes No 9. Name and Address of Current Registered Agent RAPISARDI, SALVATORE 1125 DUVAL STREET KEY WEST FL 33040 82 Street Address (P.O. Box Number is Not Acceptable) 83 Feb City FL B5 Zip Code 11. Pursuant to the provisions of Socitions 607 0502 and 607 1508, Florida Stalutes, the above memod corporation submits this statement for the purpose of changing its registered agent, or both, in the Strate of Florida Stalutes, the above memod corporation submits this statement for the purpose of changing its registered agent, and accept the obligations of Socitions 607 0502 and 607 1508, Florida Stalutes, the above memod corporation submits this statement for the purpose of changing its registered agent, in file missial with, and accept the obligations of Socition 607 0505, Florida Stalutes, the above memod corporation submits this statement for the purpose of changing its registered agent and stall s | 23 | | | | 4 | | | | | _ |
| RAPSARDI, SALVATORE 1125 DUVAL STREET KEY WEST FL 33040 11. Pursuant to the provisions of Soctions 607 0502 and 607 1508, Florida Statutos, the above manual corporation submits this statement for the purpose of changing like registered agent. I am familiar with, and accept the obligations of, Section 607 0502, Florida Statutos, the above manual corporation submits this statement for the purpose of changing like registered agent. I am familiar with, and accept the obligations of, Section 607 0502, Florida Statutos, the above manual corporation submits this statement for the purpose of changing like registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutos. SIGNATURE 12. OF FICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 11. Initial 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 11. Initial 12. OFFICERS AND DIRECTORS 13. SIRELI ADDRESS CITY-ST-2P 14. CITY-ST-2P 15. STREET ADDRESS CITY-ST-2P 16. ADDRESS CITY-ST-2P 16. ADDRESS CITY-ST-2P 17. ADDRESS 18. ADDRESS CITY-ST-2P 18. STREET ADDRESS CITY-ST-2P 19. ADDRESS CITY-ST-2P | _ | | | | | | | | | |
| RAPISARDI, SALVATORE 1125 DUVAL STREET KEY WEST FL 33040 84 City FL 85 Zip Code 11. Pursuant to the provisions of Soctions 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its regis 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 register agent. I am femiliar with, and accept the displanted agent and still applicable. SIGNATURE SUPPLIES AND DIFFICTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIFFICTORS IN 12 TIME RAPISARDI, SALVATORE 1125 DUVAL STREET 13 STREET ADDRESS CITY-ST-ZIP NEY WEST FL 33040 DELETE 13 STREET ADDRESS CITY-ST-ZIP 14 DELETE 13 STREET ADDRESS CITY-ST-ZIP 15 DELETE 15 STREET ADDRESS CITY-ST-ZIP 16 DELETE 17 STREET ADDRESS CITY-ST-ZIP 17 ST-ZIP 18 DELETE 18 STREET ADDRESS CITY-ST-ZIP 18 DELETE 19 DEL | 24 | a Nama | | | orad Acant | 30 | 1 | | | \dashv |
| 11. Pursuant to the provisions of Socitions 607.0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its regis 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, and accept the obligations of, Socition 807.0505, Florida Statutes. 11. Pursuant to the provisions of Socitions 607.0502 and 607 1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Socition 807.0505, Florida Statutes. 12. | DAI | | | it negisi | arad Again | | B1 | Name | IO. Harry and Addison of fron Hogistores Agent | \dashv |
| KEY WEST FL 33040 63 | | | | | | | | | | _ |
| ### City | | | | | | | 82 | Street Add | ddress (P.O. Box Number is Not Acceptable) | |
| The prevalence of the provisions of Socioons 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Socion 607.0505, Florida Statutes. SIGNATURE Signature, typed or private familiar with, and accept the obligations of, Socion 607.0505, Florida Statutes. Signature, typed or private familiar with, and accept the obligations of, Socion 607.0505, Florida Statutes. Signature, typed or private familiar with, and accept the obligations of, Socion 607.0505, Florida Statutes. Signature, typed or private familiar with, and accept the obligations of, Socion 607.0505, Florida Statutes. Signature, typed or private familiar with, and accept the obligations of, Socion 607.0505, Florida Statutes. Signature, typed or private familiar with, and accept the obligations of, Socion 607.0505, Florida Statutes. Signature, typed or private familiar with, and accept the obligations of, Socion 607.0505, Florida Statutes. Signature, typed or private familiar with, and accept the obligations of, Socion 607.0505, Florida Statutes. Signature, typed or private familiar with, and accept the obligations of, Socion 607.0505, Florida Statutes. Signature, typed or private familiar with, and accept the obligations of, Socion 607.0505, Florida Statutes. Signature, typed or private familiar with, and accept the obligations of, Socion 607.0505, Florida Statutes. Signature, typed or private familiar with, and accept the obligations of Socion 607.0505, Florida Statutes. Signature, typed or private familiar with, and accept the obligations of Socion 607.0505, Florida Statutes. Signature, typed or private familiar with, and accept the obligations of Socion 607.0505, Florida Statutes. Signature, typed or private familiar with, and accept the obligations of Socion 607.0505, Florida Statutes. Signature, typed or private familiar with, and accept the obligations of Socion 607.0505, Florida Statutes. Signat | VE | i MEO! FL | . 33040 | | | | 63 | | | ᅱ |
| 11. Pursuant to the provisions of Socions 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as register agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature typed or printed familiar vitin, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature typed or printed familiar vitin, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1: NAME RAPISARDI, SALVATORE 1.2 NAME 1.2 NAME 1.2 NAME 1.2 NAME 1.2 NAME 1.2 NAME 1.3 SIRECT ADDRESS CITY-ST-2P 1.3 SIRECT ADDRESS 1.4 CITY-ST-2P 1.4 CITY-ST-2P 1.5 SIRECT ADDRESS 2.3 SIRECT ADDRESS 3.3 SIRECT ADDRESS 3.3 SIRECT ADDRESS 3.4 CITY-ST-2P 4.4 CITY-ST-2P Change A SIRECT ADDRESS CITY-ST-2P A SIRECT ADDRESS CITY-ST-2P A SIRECT ADDRESS CITY-ST-2P A SIRECT ADDRESS CITY-ST-2P Change | | | | | | | | | | |
| 11. Pursuant to the provisions of Socions 607 C502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its regist of agent. I em femiliar with, and accept the obligations of, Section 607 0505, Florida Statutes, tem femiliar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE | | | | | | | 84 | City | 85 Zip Code | |
| 12. | office or r agent. I a | regi s tered ag im fa miliar w | gent, or both, in the Stato ith, and accept the oblig | of Floric ations of | la. Such change was a , Section 607,0505, Flo | authorize orida Sta | d by tutes | the corpora | ration's board of directors. I hereby accept the appointment as registered | |
| TITLE | | Signature, typed | | | | | d Age | nt signature requ | | - |
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4. Thereby 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 eath; 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 chapter, or on an attachment with an address.

13/98 205-296-210