## 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

DOCUMENT # P95000093697 (7)

**INNER VALUES INCORPORATED** 

## FILED Mar 26 1998 8:00am Secretary of State



Principal Flace	B OI BUSINESS	Mailing Address					
430 ROSS AVENUE MELBOURNE BEACH FL 32951		430 ROSS AVENUÉ Melbourne Beach FL 32951				DO NOT WRITE IN THIS SPACE	
		•				3. Date Incorporated or Qualified	i
							ĺ
6 Principal D	lace of Business	2a. Mailing Address				12/11/1995 4. FEI Number Applied For	Ι'
<del>· · ·</del>	IACE OF BUSINESS	<del>  -  </del>					ŀ
21		26				65-0633482 Not Applicable	ĺ
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required	
City & State	9	City & State				Election Campaign Financing \$5.00 May Be	1
23		28				Trust Fund Contribution Added to Fees	ĺ
Zip	Country	Zip	Country		,	8. This corporation owes or has paid the current year Intangible	1
24			30	0		Personal Property Tax due June 30. 🔼 Yes 🗌 No	
	<ol><li>Name and Address of Curren</li></ol>	t Registered Agent		<u> </u>		10. Name and Address of New Registered Agent	l
SP	INOSA, LARRY			B1	Name		ĺ
430 ROSS AVENUE				62	Street A	dress (P.O. Box Number is Not Acceptable)	
ME	ELBOURNE BEACH FL 32951			83			
				64	City	FL 85 Zip Code	
	to the associations of Continue CO7 050	2 and CO7 1E00 Elorida Ctali	ton the n	hovo	named r	corporation submits this statement for the purpose of changing its registered	1
office or r	egistered agent, or both, in the State m familiar with, and accept the obligations.	of Florida, Such change was	authorize	nd hv	the corn	poration's board of directors. I hereby accept the appointment as registered	
SIGNATURE							ĺ
Olarianone	Signature typed or printed name of registered age	rit and title if applicable (NO	TE: Registere	ed Age	nt signature r	e required when reinstating) DATE	F
12.	OFFICERS AND DIRECTORS			13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	1
TITLE	D	DELETE 1.11		TITLE		Change Addition	7
NAME	<b>S</b> PINOSA, LARRY			1.2 NAME			3
STREET ADDRESS	430 ROSS AVENUE		1.3 \$	1.3 STREET ADDRESS			Š
CITY-ST-ZIP	MELBOURNE BEACH FL 32951		1.4 0	1.4 CITY-ST-ZIP			8
TITLE	D	DELETE		2.1 TITLE		Change Addition	Š
NAME	TOLLEFSON, WILLIAM		2.2 N	2.2 NAME			İ
STREET ADDRESS	430 ROSS AVENUE		235	2.3 STREET ADDRESS			İ
	MELBOURNE BEACH FL 329	<b>K1</b>	2. 4 CITY - ST-ZIP		- 1		İ
CITY-ST-ZIP TITLE	ST ST	DELETE			11-211	Change Addition	١
	SPINOSA, DIANE M			3.1 TITLE 3.2 NAME			
NAME OTREET ARRESTOR	430 ROSS AVE				ADDRESS		
STREET ADDRESS			- 1		ADDRESS		ľ
CITY-ST-ZIP	MELBOURNE BCH FL			3.4. CITY - ST - ZIP 4.1 TITLE		Change Addition	
, TITLE		T DETELE	1			E Change E Adollon	1
NAME				NAME			ĺ
STREET ADDRESS			4.3 S	TREET	ADDRESS		1
CITY-ST-ZIP				ITY-S	T-ZIP		1
TITLÉ		☐ DELETE	5.1 T	ITLE		Change Addition	ĺ
NAME			5.2 N	IAME			
STREET ADDRESS			53S	STAEET	ADDRESS		
CITY-ST-ZIP			540	CITY-S	1-ZIP		ŀ
TITLE		DELETE	611			Change Addition	l
NAME			4	IAME	l		
STREET ADDRESS					ADDRESS		١
				CITY-S	i i		
CITY-ST-ZIP	certify that the information supplied w	ith this filing does not qualify				ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information	1
	and the second s					and the second of the second o	1

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 corporator 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 it chapter 607 an attachment with an address.