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 #

P95000096296 (5)

LYNDAR, INC.

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FILED

May 04 1998 8:00am

Secretary of State

Principal Place	e of Business	Mailing Address				I S oulions fin information of the world of	INKII DOKIO KOIAD	01110 14010 H	HAR BUTH HARM	
147 BELCHER ROAD SUITE 1 147 BELCHER ROAD SUITE 1										
LARGO FL 34641 LARGO FL 34641					L	DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualified 01/01/1996				
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		Ap	plied For	
21						59-3355014		No	t Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired		\$8.75	Additional	
22 27						5. Certificate of Status Desired		Fee Re	quired	
City & State				6. Election Campaign Financing \$5.00 May			May Be			
23				Trust Fund Contribution			o Fees			
— Zip	Country Zip Cou			4	6. This corporation owes or has paid the current year Intangible					
24	25 29 30 30				Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent					
9. Name and Address of Current Registered Agent						10. Name and Address of New He	gistered Ag	ent		
BUXTON, BRIAN P				Name						
147 BELCHER ROAD				Street	Address	s (P.O. Box Number is Not Acceptat	ole)			
SUITÉ 1				 						
LARGO FL 33771			83	1						
			84	City			FL	85 Zip (Code	
44 Pureuent	to the provisions of Sections 607.050	2 and 607 1508 Florida Statutes	the abov	e-named	Corpora	ation submits this statement for the r		nanging its	s registered	
office or re	egistered agent, or both, in the State	of Florida. Such change was au	thorized b	y the corp	poration	's board of directors. I hereby accep	ot the appoir	itment as	registered	
agent. I a	m familiar with, and accept the obliga	itions of, Section 607.0505, Flori	ida Statute	S.						
SIGNATURE	Signature, typod or printed frame of registured age	and title il applicable (NOTE:	Registered Ac	ent signature	e required w	when reinstating)	DATE		_ 	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICE	CERS AND D	IRECTOR	S IN 12	
TITLE	D	DELETE	1.1 TITLE		P		<u> </u>	T.Change	☐ Addition	
NAME	BUXTON, BRIAN P		1.2 NAME		Bu	XTON. BRIANP.				
STREET ADDRESS				T ADDRESS	147	BEICHER ROAD				
CITY-ST-ZIP	LARGO FL			ST - ZIP	LAI	XTON, BRIAN P. BELCHER ROAD RGO, FL. 33771				
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NAME			2.2 NAME						į	
STREET ADDRESS	s!		2.3 STREET ADDRESS							
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NAME	1			3.2 NAME						
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NAME ADDOCOG			4. 2 NAME		ļ .					
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NAME		beaute.	5.2 NAME				-			
STREET ADDRESS				TADDRESS ;	-				j	
CITY-ST-ZIP			5.4 CITY-						j	
TITLE		DELETE	6.1 TITLE	V. C.II	 		Τ	Change	Addition	
NAME			6.2 NAME					-		
STREET ADDRESS				T ADDRESS						
									,	

CITY-ST-ZIP

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 receiver or trusted 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.