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 # P96000002309

TY.	hellmurne Pe	xy Ervic	Q.,	Inc. ·			
Principal Plac		Mailing Address					
	orth Wickham Road	0			·		
#110 Same					DO NOT WRITE IN THIS SPACE		
Melbourne, FL 32940				3. Date Incorporated or Qualified 01/03/96			
2. Principal Place of Business 2a. Mailing Address					4. FEI Number 59-335 4285	Applied For	
26					39-333 4263	Not Applicable \$8.75 Additional	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desired	Foe Required	
City & State City & State					6. Election Campaign Financing	\$5.00 May Be	
23		28	,		Trust Fund Contribution	Added to Fees	
Zip Country Zip			Cou	ntry	8. This corporation owes or has p	paid the current year Intangible	
24	25	29	30		Personal Property Tax due Jun	e 30. Yes 🔲 No	
12 1 5 ¹⁷ 1	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New R	legistered Agent	
Racin, John A.					stopher J. Coleman	•	
109 W. New Haven Avenue				82 Street Add	dress (P.O. Box Number is Not Accepta West Hibiscus Bouleva	ible)	
Melbourne, FL 32901				1000 V	west Hibiscus Bouleva	ard	
Merbour	ne, 11 32301		1	Suite	138		
				64 City Melbou	Irno	FL 85 Zip Code 32901	
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-name office or registered agent, for both, in the State of Florida. Such change was authorized by the coagent, tam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					novation submits this statement for the	purpose of changing its registered	
office or r	egistered agent, or both, in the State	of Florida, Such change was	authorized	by the corpora	ition's board of directors. I hereby acce	ept the appointment as registered	
	in rannuar with, and accept the doings	ations of, Section 607,0303, 11	Uriua Stati	1105.		04/28/98	
SIGNATURE	Signature typed or publied name of registered age	nt and title if applicable. (NOT	E Registered	Agent signature requ	ired when reinstating)	DATE .	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFF		
TITLE	President, Secretary, Treasurer			LE		☐ Change ☐ Addition	
NAME	Runffeldt, Philip A. RUNFELDT			ME			
, STREET ADDRESS				REET ADDRESS			
CITY+ST+ZIP	Melbourne, FL 32935			Y-ST-ZIP		A	
TITLE	Vice President	☐ DELETE	21 TIT	i		☐ Change ☐ Addition	
NÁME	Gotgot, Robert			MÉ			
4201 Bartisuale Dilive				REET ADDRESS		,	
7/7/2		DELETE	2. 4 Cl	IY-ST-ZIP	~ 	☐ Change ☐ Addition	
TITLE		C bettie	3.111) 3.2 NA	1		E change E Adollon	
NAME STREET ADDRESS			4	EET ADDRESS			
CITY-ST-ZIP				Y-ST-ZIP	•		
TITLE		☐ DELETE	4.1 111		,	☐ Change ☐ Addition	
NAME			4. 2 NA	1	4000025 3 -05/21/980100	:0924	
STREET ADDRESS				EET ADDRESS	-ns/21/980100)4037	
CITY-ST-ZIP				Y-ST-ZIP	***150.00		
TITLE		☐ DELETE	5 1 TIT			☐ Change ☐ Addition	
NAME			5.2 NA	ME		4 5	
STREET ADDRESS			5 3 STF	EET ADDRESS		~~~	
CITY-ST-ZIP			5 4 CIT	Y-ST-ZIP		5.17	
TITLE		☐ DELETE	6 1 TiTi	.E		☐ Change ☐ Addition	
NAME			62 NAI	ME	·	•	
STREET ADDRESS			63 STF	EET ADDRESS			

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 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 on an attachment with a regidness.

SIGNATURE:

FILED

May 19 1998 8:00am

Secretary of State