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 # P9600002382 (5)

RETAIL ONE II, INC.

ncipal Place of Business Mailing Addr

FILED Apr 30 1998 8:00am Secretary of State



| Principal Place of Business | | Mailing Address | | |
|---|---|---|---|--|
| 3803 SAN NICHOLAS ST TAMPA FL 33629 | | 3803 SAN NICHOLAS ST TAMPA FL 33629 | | DO NOT WRITE IN THIS SPACE |
| | | | | 3. Date Incorporated or Qualified |
| | | | | 01/03/1996 |
| 2. Principal Place of Business 2 | | 2a. Mailing Address | | 4, FEI Number Applied For |
| ที | | 26 P.D. BOX 24418 1140 1341 1841 | | APPLIED FOR 65-0635498 Not Applicable |
| Suite, Apt. #, etc. | | Suite, Apt #, etc. | | 5. Certificate of Status Desired S8.75 Additional |
| 2 | | 27 | | Fee Required |
| City & State | | City & State | | 6. Election Campaign Financing \$5.00 May Be |
| 3 | | 28 TAMPA, FL | | Trust Fund Contribution Added to Fees |
| Zip | Country | Zιρ | Country | 8. This corporation owes or has paid the current year Intangible |
| 4 | 25 | 29 33623-4418 | 30 | Personal Property Tax due June 30. 🔏 Yes 🗌 No |
| | 9. Name and Address of Curre | nt Registered Agent | | 10. Name and Address of New Registered Agent |
| WO | OD, SCOTT | | 81 Name | |
| 3803 SAN NICHOLAS ST TAMPA FL 33629 | | | 82 Street Address (P.O. Box Number is Not Acceptable) | |
| | | | | |
| ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | 83 | |
| | | | 84 City | 85 Zip Code |
| | | | City | FL W LAP COUC |
| SIGNATURE | n familiar with, and accept the oblig | | Registered Agent signature r | required when reinstation) DATE |
| | | ND DIRECTORS | 13. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | DPS | DELETE | 1.1 TITLE | Change Additio |
| NAME | - | | 1.2 NAME | _ , _ |
| · · · | WOOD, SCOTT | | 1.3 STREET ADDRESS | |
| STREET ADDRESS | 3803 SAN NICHOLAS ST | | 1 | |
| CITY-ST-ZIP TITLE | TAMPA FL 33629 | DELETE | 1.4 CITY-\$1-ZIP 2.1 TITLE | Change Additio |
| | DVT | Diecit | 2.2 NAME | A |
| NAME OZOSEK ADDDEGS | KLEIER, GEORGE III | ED04 | 2.3 STREET ADDRESS | HUN W. CANLAUD PK BLUD # 204 |
| STREET ADDRESS | 2624 ENTERPRISE RD E UN | T 15-24 - / | 2 3 3 INCCT ADDRESS | THE W. DAKLAND PE BLUD # 304 FT. LANDSED ALE, FL 333// |
| CITY-ST-ZIP | CLEARWATER FL 34619 | DELETE | 2. 4 CHTY - ST - ZIP 3.1 TITLE | Change Additio |
| TITLE | | - Weere | | |
| NAME | | | 3.2 NAME | |
| STREET ADORESS | | | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | | DELETE | 3.4. CITY-ST-ZIP 4.1 TITLE | Change Addition |
| TITLE | | בַ וויינוני | | |
| NAME | | | 4. 2 NAME | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | | DELETE | 4.4 CITY - ST - ZIP 5.1 TITLE | Change Addition |
| TITLE | | ☐ DECEIG | | C ontango C roundo |
| NAME | | | 5.2 NAME | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | DELETE | 5.4 CITY-S1-ZIP | Change Addition |
| TITLE | | DELETE | 6 1 THTLE | El crande El vanga |
| NAME | | | 62 NAME | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | | 6.4 CITY - ST - ZIP | |
| 14. I hereby o | ertify that the information supplied to on this annual report or supplement director of the corporation or the record Block 13 if changed, or on an att | with this filling does not quality for all annual report is true and acc beiver or Mistee glipowered to e actimely, with an Addicas. | or the exemption stated | d in Section 119.07(3)(i), Florida Statutes. I further certify that the information nature shall have the same legal effect as if made under oath; that I am an required by Chapter 607, Florida Statutes, and that my name appears in |

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