## 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 # P9600004151 (2)

WOLFF TAN OF TALLAHASSEE INC.

FILED
May 12 1998 8:00am
Secretary of State



						-			IB) IA) (20
Principal Place of Business Mailing Address								.,	
675 W. JEFFERSON ST. 675 W. JEFFERSON ST.									
#M-103	·	#M-103				DO NOT WRITE IN THIS SPACE			
TALLAHASS US	EE FL 32304		TALLAHASSEE FL 32304 US			3. Date Incorporated or Qualified			
••						01/12/1996			
2. Principal F	Place of Business	2a. Mailing Address				4. FEI Number		] [Ar	plied For
21	iaco di Dusilloss	26				19-3359464			t Applicable
Suite, Apt	. #. etc.	4	Suite, Apt. #, etc.					\$8.75	
22	,	27	<del>-</del>			5. Certificate of Status Desired		Fee Re	
City & Sta	ie .	City & State				6. Election Campaign Financing		\$5.00	May Re
23		28	اَوَ			Trust Fund Contribution		Added t	- 1
Zip	Country					8. This corporation owes or has pai	d the cur	rent year Int	angible
24	25	29	30			Personal Property Tax due June	зо. [	Yes [	] No
	9. Name and Address of Curre	nt Registered Agent		Ц.		10. Name and Address of New Reg	jistered .	Agent	
G	RIFFIN, WALT			B1	Name				
600 VICTORY GARDEN DRIVE				82	Street Addre	ess (P.O. Box Number is Not Acceptable	le)		
#M-103			Circuit			, , , , , , , , , , , , , , , , , , ,	-, 		
T/	ALLAHASSEE FL 32301		83						
				84	City			85 Zip (	Code
				Ш			_FL		
11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered 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, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE Signature required when reinstating) DATE									
Signature, typed or priviled name of registered agont and title if applicable (NOTE Regist 12. OFFICERS AND DIRECTORS 1				d Ager	nt signature require	ADDITIONS/CHANGES TO OFFIC	DATE FRS AND	DIRECTOR	IS IN 12
TITLE	P DELETE			1.1 TITLE		MDDING(G) F WIGE TO G! 10		Change	Addition
NAME	GRIFFIN, WALT		1.2 N					-	_
STREET ADDRESS	VE, #M103			ADORESS					
CITY-ST-ZIP	TALLAHASSEE FL			ITY-ST					
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NAME			2.21		-				İ
STREET ADDRESS	l.		2.3 S	2.3 STREET ADDRESS		;	1.2		
CITY-ST-ZIP		3		2.4 CITY-ST-ZIP					
TITLE		☐ DELETE	3.1 TITLE					Change	Addition
NAME			3.2 NAME						ŀ
STREET ADDRESS			3.3 S	TREET A	ADDRESS				ļ
CITY-ST-ZIP			3.4, CITY-ST-ZIP		T-ZIP				
TITLE	☐ DELETE 4.11		TLE				Change	Addition	
NAME			4.2 N	IAME					
STREET ADDRESS			4.3 S	rreet A	ADORESS				
CITY-ST-ZIP			4.4 C	ITY-ST	r-ZIP				
TITLE		☐ DELETE	5.1 Ti	TLE				Change	Addition
NAME			5.2 N	AME					1
STREET ADDRESS			5.3 S	TREET A	ADDRESS				ŀ
CITY-ST-ZIP			5.4 C	TY-ST	r- <b>Z</b> IP				
TITLE		DELETE	6.1 TI	TLE				☐ Change	Addition
NAME	1		6.2 N	AME					
STREET ADDRESS			6.3 S	TREET A	ADDRESS				
CITY-ST-ZIP				ITY-ST					
44 I haraby	and the that the information cumpled	with this filing does not qualify to	v the ev	amnt	ion etated in S	Section 119 07(3)(i) Florida Statutes 11	lumber or	ertify that the	information

4. 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 informatio 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 visually experience 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.

CICNIATURE.

Ab It Go Af.

4-29-58 850-671-5345

;R2E034 (10/97)