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 # P9600009297 (8)

FILED Apr 27 1998 8:00am Secretary of State

LE MA	y stark enterprise, ini	C.			
Principal Plac	e of Business	Mailing Address			ii Birila tāsiā siālā 18111 jaās 1841
13947 GERANIUM PL. 13947 GERANIUM PL.					
WELLINGTON FL 33414 WELLINGTON FL 33414				DO NOT WOITE IN T	I II C C C C C C C C C C C C C C C C C
				DO NOT WRITE IN T 3. Date Incorporated or Qualified	HIS SPACE
				01/26/1996	
9 Principal P	tace of Business	2s, Mailing Address		4. FEI Number	Applied For
21	ace or Business	26. Wilding Address		65-0636768	Not Applicable
Suite, Apt.	#. elc	Suite, Apt #, etc.		:	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	0	Crty & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	B. This corporation owes or has paid the	current year Intangible
24	25	29	30	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registe	red Agent
LE	MAY, ROBERT C		81 Name		
13947 GERANIUM PL.			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
WE	ELLINGTON FL 33414				
			83		
			84 City		85 Zip Code
			Only		FL S Zip Code
office or r agent a SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the oblig Signature, typed or printed name of registered ag		Authorized by the corporal orida Statutes.	poration submits this statement for the purpo- tion's board of directors. I hereby accept the	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	<u> </u>
TITLE	D	DELETE	1.1 TOTLE		Change Addition
NAME	LEMAY, ROBERT C		1.2 NAME		
STREET ADORESS	13947 GERANIUM PL.		1.3 STREET ADDRESS		
CITY-ST-ZIP	WELLINGTON FL 33414		1.4 CITY-ST-ZIP		!
TITLE	D	DELETE	2.1 TOTLE		Change Addition
NAME	LEMAY, GAIL		2.2 NAME		
STREET ADDRESS	13947 GERANIUM PL.		2.3 STREET ADDRESS		
CITY-ST-ZIP	WELLINGTON FL 33414		2. 4 CITY-ST-ZIP		;
TITLE	D	DELETE	3.1 TITLE		Change Addition
NAME	STARK, WALTER J		3.2 NAME		
STREET ADDRESS	5240 RIVERVIEW BLVD. W		3.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON FL 33209		3.4. CITY-ST-ZIP		
TITLE	D	DELETE	4.1 TITLE		Change Addition
NAME	STARK, SUSAN		4.2 NAME		
STREET ADDRESS	5240 RIVERVIEW BLVD. W		4.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON FL 33209		4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME		Trans.	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP	•	
TIFLE		DELETE	5.4 CH Y-S1-ZIF		Change Addition
NAME			6.2 NAME		
			6.3 STREET ADDRESS		
STREET ADDRESS			0.3 SINCE I AUUNESS		

14. I hereby certify that the information supplied with this filing doos not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual roped or supplemental annual roport 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 foreign of the roceiver or truestee 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 attachmon with an address.

01011471105

KOBBET C

4/20

561-790-6500