FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Feb 02, 1999 8:00am

Secretary of State

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

19	999	DIVISION OF CORP		02-02-1999 90001 026 ****150.00
DOCUM	ENT # P96000	012095		02 02 1555 50001 020 150,00
1. Corporation N	ASSET MANAGEMENT, II	NC.		T COMMEND THE TRANSPORTER BOTH BOTH BOTH BOTH BOTH HOLD WITH BOTH BOTH BOTH BOTH BOTH BOTH BOTH BO
	Partial Call			
Principal Place of	f Business	Mailing Address	-	
1250 TAMIAMI TRAIL NORTH SUITE 101		1250 TAMIAMI TRAIL NORTH SUITE 101		DO NOT WRITE IN THIS SPACE
NAPLES FL 34102	!	NAPLES FL 34102		3. Date incorporated or Qualifed 02/06/1996
2. Principal Place of Business		2a. Mailing Address		4. FEI Number Applied For Not Applicable
21 Principal Place of Education		26		55-055/643 \$8.75 Additional
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired Fee Required
22		City & State		6. Election Campaign Financing \$5.00 May Be Added to Fees
City & State	,	28		Trust Fulla Schalbation
Z ip	Country	Zip	Country	8. This corporation owes the current year Intangible Personal Property Tax. No No
24	25	29 30		10. Name and Address of New Registered Agent
	9. Name and Address of Currer	nt Registered Agent	81 Name	
CAME	TOOM D SCOTT		82 Street	Address (P.O. Box Number is Not Acceptable)
CAV1250 TAMIAMI TRAIL NORTH				
SUITE	101		83	85 ZIp Code
	ES FL 34102		84 City	FI) (
4 15000 19 41 35 45 4	Tue of Sections 607 050	n2 and 607 1508. Florida Statutes,	the above-named	d corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
11. Pursuant t	o the provisions of Sections 607.607 egistered agent, or both, in the State on familiar with, and accept the obligations.	of Florida: Such change was authorities of Section 607.0505, Florida	orized by the corp a Statutes.	d corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
Regardent Nati	Milannina wind and assept the and	સી કો કો કે ઉપનથી. •		
SIGNATURE	Signature, typed or printed name of registered age	SIL CITE THE TANK	gistered Agent signature 13.	a required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	OFFICERS A	ND DIRECTORS DELETE	1.1 TITLE	☐ Change ☐ Addition
TITLE	D Cameron, R.: Scott	_	1.2 NAME	
NAME	690 BANYAN CIRCLE		1.3 STREET ADDRESS	s
STREET ADDRESS	NAPLES FL 34102	· · · · · · · · · · · · · · · · · · ·	1.4 CITY-ST-ZIP	Change Addition
TITLE		☐ DELETE	2.1 TITLE	
NAME		•	2.2 NAME	
STREET ADDRESS			2.3 STREET ADORES 2.4 City-St-ZIP	
CITY-ST-ZIP	21 (15 x 3 x 4 x 3 x 4 x 3 x 4 x 4 x 4 x 4 x 4	□ DELETE	3.1 TITLE	Change Addition
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NAME	[[[]]] [[] [[] [] [[] [] [] [] [] [] []	· · · · · · · · · · · · · · · · · · ·	3.3 STREET ADDRES	SS 20 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -
STREET ADDRESS	1 4 A 1		3.4. CITY-ST-ZIP	☐ Change ☐ Addition
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)	0 . 1 2 00233	1250 - Ale 14 - Chil	4,2 NAME	`.
STREET ADDRESS	Gert. SCHIII	11	4.3 STREET ADDRES	·
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TITLE			5.2 NAME	THE MENT OF THE PARTY OF THE PA
NAME			5.3 STREET ADDRE	1
STREET ADDRESS	· [)		5.4 CITY-ST-ZIP	☐ Change ☐ Additio
CITY-ST-ZIP	University K Co	☐ DELETE	6.1 TITLE	Colonide Colonida
NAME	BON BROUGH (TO LE		6.2 NAME	
STREET ADDRES	1 0x49 50 50 11507 1150 1		6.3 STREET ADDRE	ESS
SIREE I ALKOINES	Ī		6.4 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 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 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 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 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 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 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 indicated on this annual report or supplemental 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 indicated on this annual report or supplemental annual report or supplem

SIGNATURE: