## 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

P96000013969 (6) **DOCUMENT** #

Country

9. Name and Address of Current Registered Agent

**BACCHUS IMPORTS, INC.** 

| FINCIPAL FIECO OF DUSINOSS                 |  |
|--|--|
| 2301 PARK AVE #408<br>ORANGE PARK FL 32073 |  |

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

21

22

24

Mailing Address

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc

26

27

28

2301 PARK AVE #406 **ORANGE PARK FL 32073** 

## **FILED** Apr 14 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified

8. This corporation owes or has paid the current year Intangible

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

□Ño

Yes

Not Applicable

02/14/1996 4. FEI Number

59:3388449

5. Certificate of Status Desired

6. Election Campaign Financing

Personal Property Tax due June 30.

10. Name and Address of New Registered Agent

Trust Fund Contribution

| 2301 PARK AVE #406<br>ORANGE PARK FL 32073   |                                    |  |                      |                                  |
|--|------------------------------------|--|----------------------|----------------------------------|
|  |                                    | dress (P.O. Box Number is Not Acceptable)              |                      |                                  |
| ONARGE PARK FL 32073   | 83                                 |  |                      |                                  |
|  | 64 City                            | FL   | 85 Z                 | p Code                           |
| <ul> <li>Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, office or registered agent, or both, in the State of Florida. Such change was auth agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida.</li> </ul>  | orized by the corpora              | poration submits this statement for the purpose of     | changing<br>ointment | g its registere<br>as registered |
| GNATURE  | ·····                              |  |                      |                                  |
| Signature, typed or printed name of registered agent and title if applicable (NOTF: Both Control of the control | rgistered Agent signature request. | ADDITIONS/CHANGES TO OFFICERS AND                      | DIRECT               | ORS IN 12                        |
| LE P DELETE  | 1.1 TITLE                          | ADDITIONS/OFFICE OF TO OFFICE AND                      | Chang                |                                  |
| ME BROWN, JAMES R  | 1.2 NAME                           |  |                      |                                  |
| REET ADDRESS 2301 PARK AVE #408  | 1.3 STREET ADDRESS                 |  |                      |                                  |
| Y-ST-ZIP ORANGE PARK FL 32073  | 1.4 CITY - ST - ZIP                |  |                      |                                  |
| LE S DELETE  | 2.1 TITLE                          |  | Chang                | e Additio                        |
| ME SMITH, VICKI L  | 2.2 NAME                           | •  | _ •                  |                                  |
| REET ADDRESS 2301 PARK AVE #408  | 2.3 STREET ADDRESS                 | ·  |                      |                                  |
| Y-ST-ZIP ORANGE PARK FL 32073  | 2. 4 CITY - ST - ZIP               |  |                      |                                  |
| LE AS DELETE   | 3.1 TITLE                          |  | Chang                | e Additio                        |
| ME LAIN, JASON   | 3 2 NAME                           |  |                      |                                  |
| REET ADDRESS 2301 PARK AVE #406  | 3.3 STREET ADDRESS                 |  |                      |                                  |
| Y-ST-ZIP ORANGE PARK FL 32073  | 3.4. CITY-ST-ZIP                   |  |                      |                                  |
| LE DELETE  | 4.1 TITLE                          |  | Chang                | e 🔲 Additio                      |
| ME   | 4. 2 NAME                          |  |                      |                                  |
| reet address   | 4.3 STREET ADDRESS                 |  |                      |                                  |
| Y-ST-ZIP   | 4.4 CITY-ST-ZIP                    |  |                      |                                  |
| LE DELETE  | 51 TITLE                           |  | Chang                | e 🔲 Addilio                      |
| ME   | 52 NAME                            |  |                      |                                  |
| REET ADDRESS   | 5 3 STREET ADDRESS                 |  |                      |                                  |
| Y-\$1-ZIP  | 5.4 CITY-ST-ZIP                    |  | _                    |                                  |
| LE DELETE  | 6.1 TITLE                          |  | Chang                | e 🔲 Additio                      |
| ME   | 6.2 NAME                           |  |                      |                                  |
| REET ADDRESS   | 6.3 STREET ADDRESS                 |  |                      |                                  |
| Y-ST-ZIP   | 6.4 CITY-ST-ZIP                    | n Section 119.07(3)(i), Florida Statutes. I further ce |                      |                                  |

Country

81 Name

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