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

P96000019627 (4)

Country

9. Name and Address of Current Registered Agent

25

SILBERSTEIN, DAVID M 720 SOUTH ORANGE AVE.

SARASOTA FL 34236

HITA A. HICHARDS, P.A.		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/04/1996				
Principal Place of Business	Mailing Address					
6915 32ND AVENUE WEST BRADENTON FL 34209	6915 32ND AVENUE WEST BRADENTON FL 34209					
2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied Fo			
21	26	65-0647333	Not Applica			
Suite, Apt. W, etc	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State	Gity & State	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			

710

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\			103						1
			84	City	FL	85	Zip C	ode	1
office or re	o the provisions of Sections 607.0502 and 607.1508, egistered agent, or both, in the State of Florida Such in familiar with, and accept the obligations of, Section	i change was author	ized by	the corp	corporation submits this statement for the purpose of poration's board of directors. I hereby accept the app	changi ointmer	ing its nt as r	registered egistered]
SIGNATURE .	Signature, typed or printed name of regulated agent and tille if applicable	e (NOTE Reas	tered Age	nt signature	required when reinstating) DATE				
12.	OFFICERS AND DIRECTORS		ĭ3.		ADDITIONS/CHANGES TO OFFICERS AND	DIREC	TORS	IN 12	曾
TITLE	D	DELETE 1	.1 TITLE	•		Cha	inge	Addition	(10/97)
NAME	RICHARDS, RITA A	1	.2 NAME						7
STREET ADDRESS	6915 32ND AVENUE W	1	3 STREET	ADDRESS					lg.
CITY-ST-ZIP	BRADENTON FL	1 1	4 CITY-S	T-ZIP					CR2E034
TITLE		DELETE 2	1 TITLE			Cha	nge	Addition	[다
NAME		2	2 NAME						1
STREET ADDRESS		2	3 STREET	ADDRESS					
CITY-ST-ZIP			4 CITY-S	T-21P					1
TITLE		DELETE 3	1 TITLE			Cha	nge	Addition	1
NAME		3.	.2 NAME						
STREET ADDRESS		3	3 STREE1	ADDRESS					ì
CITY-ST-ZIP			4. CITY-S	T-ZIP					
TITLE		☐ DELETE 4	1 TITLE			Cha	nge	Addition	1
NAME		4.	2 NAME						
STREET ADDRESS		4.	3 STREET	ADDRESS					
CITY-ST-ZIP			4 CITY-SI	r-ziP)
TITLE		DELETE 5.	1 TITLE			☐ Chai	nga	Addition	1
NAME		5.	2 NAME	-					}
STREET ADDRESS		5	3 STREET	ADDRESS]
CITY-ST-ZIP			4 CITY - ST	- ZIP					ļ
TIPLE		DELETE 6	1 TITLE			Chai	nge	☐ Addition	
NAME		6.	2 NAME						
STREET ADDRESS		8	3 STREET	ADDRESS					
CITY-ST-ZIP		6	4 CITY-SI	-710	İ				1

Country

81 Name

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14. Thereby 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 officer or director of the corporation or the receiver of justee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or of an attachment with an address

SIGNATUR

FILED

Apr 30 1998 8:00am

Secretary of State

This corporation owes or has paid the current year Intangible

Personal Property Tax due June 30.

Street Address (P.O. Box Number is Not Acceptable)

10. Name and Address of New Registered Agent

Yes

Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees

□ No