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 # P96000020320 (3)

Principal Place of Business Mailing Address 1608 SAND HOLLOW LANE 1608 SAND HOLLOW LANE VALRICO FL 33594								DO NOT WRITE IN THIS SPACE			
							3.	Date Incorporated or Qualified			
								03/04/1996			
2. Principal P	lace of Business	<u> </u>	2a. Mailing Address			4.	4. FEI Number Applied				
21		26					59-3364428 Not App				
Suite, Apt.	#, etc.	27	Suite, Apt. #, etc.			5.	Certificate of Status Desired		Additional Required		
City & State		28	City & State				6.	Election Campaign Financing Trust Fund Contribution		May Be to Fees	
Zip	Country	<u> </u>	Zip	Cou	intry	•	8.	This corporation owes or has paid the o		_ ~	
24	25	29		30				Personal Property Tax due June 30.		LI No	
	g. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent				
	itts, debra				81	Name					
1608 SAND HOLLOW LANE					82 Street Address (P.O. Box Number is Not Acceptable)						
VA	LRICO FL 33594										
					83						
					84	City		F	L - ' '	Code	
11. Pursuant office or r agent. I a	to the provisions of Section egistered agent, or both, in mathematical familiar with, and accept	ns 607.0502 and 6 in the State of Flor of the obligations of	607.1508, Florida Statu ida: Such change was if, Section 607.0505, F	utes, the ab authorized lorida Stat	oove d by utes	e-named cor the corpora s.	poration's b	in submits this statement for the purpose poard of directors. I hereby accept the a	of changing ppointment a	its registered is registered	
SIGNATURE											
Signature, typed or printed name of registered agent and title if applicable (NOTE: F 12. OFFICERS AND DIRECTORS					Age	nt signature requ		ADDITIONS/CHANGES TO OFFICERS A	NO DIRECTO	NDC INI 12	
TITLE	D DELETE		13.	1.1 TITLE			ADDITIONS/CHANGES TO OFFICERS A	Change			
NAME	POTTS, DAVID T			1.2 NA							
STREET ADDRESS	1608 SAND HOLLOW LANE			1.3 STREET ADDRESS							
CITY-ST-ZIP	VALRICO FL 33594			1.4 Cri							
TITLE	D		DELETE	2.1 TIT		. 44			Change	Addition	
NAME	POTTS, DEBRA			2.2 NA		İ					
STREET ADDRESS	1608 SAND HOLLO	W LANE				ADDRESS					
CITY-ST-ZIP	VALRICO FL 33594			2. 4 CI							
TITLE			DELETE	3.1 TIT	$\overline{}$				Change	Addition	
NAME				3.2 NA	ME	}			_ •		
STREET ADDRESS						ADDRESS					
CITY-ST-ZIP				3.4. CI		· J					
TITLE			DELETE	4.1 T/T					Change	Addition	

CITY-\$7-21P 14. I hereby certify that the information supplied with this filting 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 or furstee 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 attachment with an address.

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

DELETE

DELETE

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

Change

Change

Addition

Addition

FILED

Apr 13 1998 8:00am

Secretary of State